From:	Leggin, Brooke (HHS/OWH)
То:	Bishop-Crawford, Jennifer (OS/OASH)
CC:	Marshall, Candace (OS/OASH)
Subject:	RE: Breast Cancer Reconstruction campaign and Breast cancer awarness month
Date:	2017/10/04 11:03:41
Priority:	Normal
Туре:	Note

Thanks Candace, you rock.

(b)(5)

From: Marshall, Candace (OS/OASH)

Sent: Wednesday, October 04, 2017 10:58 AM

To: Bishop-Crawford, Jennifer (OS/OASH); Leggin, Brooke (HHS/OWH)

Subject: RE: Breast Cancer Reconstruction campaign and Breast cancer awarness month

Jenn,

Here is what Brooke sent out earlier. The graphics are also attached.

We've started sending out messages on our channels on yesterday and have them scheduled to go out throughout the month.

Candace

From: Leggin, Brooke (HHS/OWH)

Sent: Thursday, September 21, 2017 9:34 AM
To: Bishop-Crawford, Jennifer (OS/OASH)

Cc: Marshall, Candace (OS/OASH)

Subject: OWH's Breast Cancer Awareness month activities

For the upcoming 2017 breast cancer awareness month in October, the HHS Office on Women's Health will promote awareness of the Women's Health and Cancer Rights Act (WHCRA), which requires most health insurance plans to cover reconstruction after a medically-necessary mastectomy. (b)(5)

(b)(5)

Link to English Fact Sheet:



Page 002

Withheld pursuant to exemption

(b)(5)

of the Freedom of Information and Privacy Act



Page 003

Withheld pursuant to exemption

(b)(5)

of the Freedom of Information and Privacy Act



Page 004

Withheld pursuant to exemption

(b)(5)

of the Freedom of Information and Privacy Act



From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Wednesday, October 04, 2017 10:37 AM

To: Leggin, Brooke (HHS/OWH); Marshall, Candace (OS/OASH)

Subject: Breast Cancer Reconstruction campaign and Breast cancer awarness month

Good morning, Brooke and Candace,

Brooke--Please provide me with a quick write up of what we are planning to do to promote the Breast Cancer Reconstruction Campaign and Breast Cancer Awareness month on Womenshealth.gov Candace—Please provide me with any language or infocards etc., that we are promoting this month related to Breast Cancer Awareness or the reconstruction campaign.

I will need both of these items by COB tomorrow. Thanks, Jenn

Dr. Jennifer Bishop-Crawford, MPH

Director, Division of Strategic Communications



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 728E, Washington, DC 20201

E-mail: Jennifer.Bishop-Crawford@hhs.gov Main: 202-690-7650 | Direct: 202-260-6883

Sender:	Leggin, Brooke (HHS/OWH)
Recipient:	Bishop-Crawford, Jennifer (OS/OASH) ; Marshall, Candace (OS/OASH)
Sent Date:	2017/10/04 11:03:40
Delivered Date:	2017/10/04 11:03:41



From:	Bishop-Crawford, Jennifer (OS/OASH)
То:	Broido, Tara (HHS/OASH)
Subject:	RE: HHS Logo & About OWH fact sheet?
Date:	2017/03/28 12:06:00
Priority:	Normal
Туре:	Note

Thanks for your feedback. (b)(5)

(b)(5)

Jenn

From: Broido, Tara (HHS/OASH)

Sent: Tuesday, March 28, 2017 12:00 PM **To:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: HHS Logo &About OWH fact sheet?

Hi Jenn,

(b)(5)		

Thanks, Tara

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Tuesday, March 28, 2017 11:22 AM

To: Broido, Tara (HHS/OASH)

Subject: FW: HHS Logo &About OWH fact sheet?

Importance: High

Thoughts? (b)(5)



From: Leggin, Brooke (HHS/OWH)
Sent: Tuesday, March 28, 2017 11:21 AM
To: Bishop-Crawford, Jennifer (OS/OASH)
Subject: HHS Logo &About OWH fact sheet?

Importance: High

I just realized that we're probably required to put the HHS logo on the About OWH fact sheet? It just came out of 508-compliance and was posted to the website. (b)(5)

(b)(5)

Brooke Leggin

Web and Community Manager



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: brooke.leggin@hhs.gov Work Hours: 7:30 am to 4:00 pm ET

Main: 202-690-7650 | Direct: M, Th, F 202-205-2373 T, W 301-864-2607

Websites: www.womenshealth.gov | www.girlshealth.gov
OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov
Connect with us on: Twitter | Facebook | YouTube

Sender:	Bishop-Crawford, Jennifer (OS/OASH)
Recipient:	Broido, Tara (HHS/OASH)
Sent Date:	2017/03/28 12:06:11
Delivered Date:	2017/03/28 12:06:00



From:	Thompson, Cheryl (OS/OASH)
То:	Bishop-Crawford, Jennifer (OS/OASH)
Subject:	RE: Region 7 National OWH Visit Agenda.docx 090517.docx
Date:	2017/09/12 15:39:19
Priority:	Normal
Туре:	Note

No problem. I will let them know.

Cheryl J. Thompson, MSPH

Public Health Advisor/Regional Women's Health Liaison



OWH_logo_150

Office on Women's Health U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Washington, DC 20201

E-mail: cheryl.thompson@hhs.gov
Telework: Wednesday and Friday

Main: 202-690-7650 | Direct: 202-205-2551

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Tuesday, September 12, 2017 3:36 PM

To: Thompson, Cheryl (OS/OASH)

Subject: RE: Region 7 National OWH Visit Agenda.docx 090517.docx

Not really. I wanted to have a real meeting.

From: Thompson, Cheryl (OS/OASH)

Sent: Tuesday, September 12, 2017 3:36 PM **To:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Region 7 National OWH Visit Agenda.docx 090517.docx

Jenn,

Joyce and Shary would like us to come to their offices and then go nearby to meet over lunch. Does that work for you?

Thanks.

Cheryl J. Thompson, MSPH

Public Health Advisor/Regional Women's Health Liaison





OWH_logo_150

Office on Women's Health U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Washington, DC 20201

E-mail: cheryl.thompson@hhs.gov
Telework: Wednesday and Friday

Main: 202-690-7650 | Direct: 202-205-2551

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Wednesday, September 06, 2017 3:42 PM

To: Thompson, Cheryl (OS/OASH)

Subject: RE: Region 7 National OWH Visit Agenda.docx 090517.docx

The fact sheet on the website provided some examples of our work. OWH's priorities are as follows:

- 1. HIV/AIDS
- 2. Reducing health disparities
- 3. Violence and trauma
- 4. Promoting health care enrollment
- 5. Addressing obesity in women and girls
- 6. Emerging and unmet needs
- 7. Health across the lifespan

Breastfeeding is not an OWH priority at this time and that needs to be made clear to all regional staff.

From: Thompson, Cheryl (OS/OASH)

Sent: Wednesday, September 06, 2017 3:29 PM **To:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Region 7 National OWH Visit Agenda.docx 090517.docx

I added them as a reminder from the list on the Website (fact sheet).

Cheryl J. Thompson, MSPH

Public Health Advisor/Regional Women's Health Liaison



OWH logo 150

Office on Women's Health U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Washington, DC 20201

E-mail: cheryl.thompson@hhs.gov Telework: Wednesday and Friday

Main: 202-690-7650 | Direct: 202-205-2551

From: Bishop-Crawford, Jennifer (OS/OASH)
Sent: Wednesday, September 06, 2017 3:27 PM



To: Thompson, Cheryl (OS/OASH)

Subject: RE: Region 7 National OWH Visit Agenda.docx 090517.docx

(b)(5)

From: Thompson, Cheryl (OS/OASH)

Sent: Wednesday, September 06, 2017 3:24 PM **To:** Bishop-Crawford, Jennifer (OS/OASH)

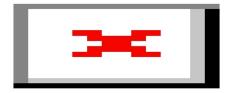
Subject: Region 7 National OWH Visit Agenda.docx 090517.docx

Hi Jenn,

Apologies for not coming over immediately following the RWHC meeting. The call went over (b)(5)

I've attached the draft agenda, with additions in red, for the KC meeting. If we take the flight below, we will have a window from 11:30 - 1:30 on the ground.

(b)(5)



This is the flight that Syreeta found that allows us plenty of time for a meeting in KC.

Cheryl

Sender:	Thompson, Cheryl (OS/OASH)
Recipient:	Bishop-Crawford, Jennifer (OS/OASH)
Sent Date:	2017/09/12 15:39:18
Delivered Date:	2017/09/12 15:39:19



From:	Jones, Jamila H. (CDC/OPHSS/CSELS/DPHID) <akq3@cdc.gov></akq3@cdc.gov>
То:	Bishop-Crawford, Jennifer (OS/OASH)
Subject:	Community Guide and Women's Health
Date:	2017/08/21 10:14:46
Priority:	Normal
Туре:	Note

Jennifer,

I'm very excited about the possibility of collaborating more with the OWH. We've heard from our users that they liked the women's health fact sheet and would love to see more information about these issues on our website. During FY17 to date, the women's health fact sheet has been the most downloaded fact sheet on our website (1,024 downloads). We think creating a landing page focused on women's health and featuring infographics, fact sheets, and other tailored content related to this population will be a welcomed addition. Below is a breakdown of our website users as self-identified by those who responded to the ForeSee survey. During September 2014 – September 2015, ForeSee was used to conduct a survey of users and their behaviors and the results demonstrate that health departments, academic users, and representatives from state and federal government are primary users of the website. For FY 2017, we are averaging 3,036 page views/day from 889 unique visitors/day and we're on track to reach our goal of 1.2M views by the end of the fiscal year. Please don't hesitate to let me know if you questions or would like to discuss further.

Thanks, Jamila

Users of The Community Guide

Student	18%
Health Educator/Health Promotion Specialist	16%
Clinical Professional	15%
Program Planner/Manager/Project Officer	12%
Other, please specify:	12%
Researcher	9%
Policy Maker/Analyst/Advisor	6%
Teacher/Instructor/Professor	5%
Volunteer	2%
Lay Health Worker/Community health worker/Promotora	2%
Social Worker	1%
Workplace wellness representative	1%
Media Representative	0%
Financial/Budget Manager	0%



Jamila H. Jones, PHD, MPH, MCHES | Dissemination and Implementation Team

Community Guide Branch

Division of Public Health Information Dissemination

Center for Surveillance, Epidemiology, and Laboratory Services

Office of Public Health Scientific Services

Centers for Disease Control and Prevention (CDC)

1600 Clifton Road, NE, MS E-69, Atlanta, GA 30329

Ofc: 404-498-6401 | Fax: 404-498-1177

Telework Mondays and Fridays 678-596-3725

Sender:	Jones, Jamila H. (CDC/OPHSS/CSELS/DPHID) <akq3@cdc.gov></akq3@cdc.gov>
Recipient:	Bishop-Crawford, Jennifer (OS/OASH)
Sent Date:	2017/08/21 10:14:01
Delivered Date:	2017/08/21 10:14:46



From:	Gessie Thompson (1)@gessiethompson.com>	
То:	Borden, Valerie (HHS/OASH)	
CC:	Bishop-Crawford, Jennifer (OS/OASH)	
Subject:	QUESTION: Blog submission for the Office on Women's Health	
Date:	2017/10/23 10:51:27	
Priority:	Normal	
Туре:	Note	

Thank you so much Valerie! Also, if you're in town on Wednesday, I'm participating in a Congressional Briefing sponsored by Congresswoman Yvette Clarke and the Black Women's Health Imperative on the State of Black Women's Health.

Jennifer: I've copied you on this too as a means of sharing it with you and asking you to do the same.

Below is an overview and I've attached the flyer. Would you mind sharing it with your network as well? The event is open to the public.

Black Women's Health Congressional Briefing

Hosted by: Rep. Yvette D. Clarke, Congressional Caucus on Black Women &Girls, and Black Women's Health Imperative

Title: "Black Women's Health: Where Do We Go From Here"

Theme: The status of Black women's health under the Trump Administration.

Overview:

This panel discussion will provide the current state of Black women's health and the impact of current health policies. Specifically, the conversation will center around the Affordable Care Act (ACA) and the various repeal efforts. Specifically, the conversation will include discussions on:

- the ways ACA has improved the health of Black women
- the harms that could result from a repeal of the ACA
- the importance of civic engagement in Black women's health



We aim to make this an ongoing conversation about the need to address the impact of policy on Black women's health as a whole, as well as how Black women's health can be a part of the conversation when developing policies. This briefing features several stakeholders in the health care reform debate, from consumers to policy experts to health plans and hospital systems. This event is open to Members of Congress, congressional staff, and the general public.

Date: Wednesday, October 25, 2017

Time: 3:30 - 5:00 pm

Location: CVC 268 (Congressional Meeting Room North)

Have an amazing day!

Your HOPE Sister, Gessie J. Thompson CEO, Hope Beyond Fibroids Co-Founder, Hope Beyond Fibroids Elimination Program Nutritional Health Coach, Speaker, Author & Fibroids Activist P: 718-591-2447

M: (b)(6) F: 646-478-9179

(b)(@gessiethompson.com www.gessiethompson.com

Read How She Eliminated 50 FIBROIDS Without Surgery!

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On Mon, Oct 23, 2017 at 9:34 AM, Borden, Valerie (HHS/OASH) < <u>Valerie.Borden@hhs.gov</u>> wrote:

Hi Gessie,



Yes, all is well on my end! Hope you are feeling healthy and strong.

You are allowed to use an edited version of your blog for another website.

If you use the exact language you can provide an editorial note similar to what we do when we cross post from another site:

This blog is cross-posted from the Office on Women's Blog dated XXXX.

Best,

Valerie Borden

From: (b)(6)@upliftgroup.com [mailto (b)(6)@upliftgroup.com] On Behalf Of Gessie

Thompson

Sent: Thursday, October 19, 2017 7:01 PM

To: Borden, Valerie (HHS/OASH)

Subject: QUESTION: Blog submission for the Office on Women's Health

Hi Valerie,

I hope this finds you thriving. I wanted to check in with you regarding the blog I wrote for WomensHeatlh.gov earlier this year. I'm writing a piece for a website called <u>The Mighty</u> and want to use an edited version of that piece.

Do we have permission to do so? I don't remember if there were any restrictions related to the blog. Thank you!



Your HOPE Sister,

Gessie J. Thompson

CEO, Hope Beyond Fibroids

Co-Founder, Hope Beyond Fibroids Elimination Program

Nutritional Health Coach, Speaker, Author & Fibroids Activist

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On Fri, Apr 28, 2017 at 8:59 AM, Borden, Valerie (HHS/OASH) <\Psi Valerie.Borden@hhs.gov>wrote:

Hi Gessie,

Your blog post is live! Thanks so much for working with us to present this important topic to our followers. Feel free to promote the blog over your channels!

https://www.womenshealth.gov/blog/hope-beyond-fibroids



Valerie Borden

From: Gessie Thompson [mailto: (b) @gessiethompson.com]

Sent: Monday, April 24, 2017 12:40 PM

To: Allison Hall-Jordan

Cc: Borden, Valerie (HHS/OASH)

Subject: Blog submission for the Office on Women's Health

Ok. Crossing my fingers that we'll be able to get it up while we're still in Fibroids &a Infertility Awareness Week!

On Mon, Apr 24, 2017 at 12:37 PM Allison Hall-Jordan (b)(6) @hagersharp.com wrote:

Great, thank you!

We expect it to go up by the end of the week. We'll definitely keep you in the loop. Thanks!

From: Gessie Thompson [mailto (b) (@gessiethompson.com]

Sent: Monday, April 24, 2017 12:18 PM

To: Allison Hall-Jordan (h)(6) @hagersharp.com>
Cc: Borden, Valerie (HHS/OASH) < Valerie.Borden@hhs.gov>
Subject: Re: Blog submission for the Office on Women's Health

Good Morning Allison,



This is perfect. Do you have any insight as to when it might be posted?

Thank you so much for your patience with my back and forth changes. I look forward to the FINAL FINAL.

Your HOPE Sister,

Gessie J. Thompson

Co-Founder, Hope Beyond Fibroids Elimination Program

Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach

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On Mon, Apr 24, 2017 at 11:48 AM, Allison Hall-Jordan (b)(6) @hagersharp.com>wrote:

Hi Gessie,



Thanks for flagging the dates. We made that change. Also, we accepted "siphoning off," but we modified the statistic to match what's in the OWH fact sheet. Lastly, I realized this morning that your bio was still a little too long. We have a max of 43 characters. Thanks for all your patience and flexibility. The attached post is now in the final round of OWH review. We'll be sure to keep you in the loop. Thanks, and I hope you had a nice weekend! Allison From: Gessie Thompson [mailto http://gessiethompson.com] Sent: Sunday, April 23, 2017 11:37 PM **To:** Allison Hall-Jordan <(h)(6) @hagersharp.com> Cc: Borden, Valerie (HHS/OASH) < Valerie.Borden@hhs.gov> Subject: Blog submission for the Office on Women's Health Hi Allison, I hope this finds you well. One quick note: Please correct the dates for National Fibroids Awareness and National Infertility Awareness week. It's actually, April 23 to 29th. Thank you! Your HOPE Sister,



Gessie J. Thompson

Co-Founder, Hope Beyond Fibroids Elimination Program

Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach

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On Fri, Apr 21, 2017 at 5:53 PM, Gessie Thompson (b)(a)gessiethompson.com>wrote:

Hi Allison,

Thank you so much for your edits! A few last notes:

• I understand the issue regarding the statistics but because fibroids are such a marginalized issue the awareness is extremely low. Therefore, I



feel it is very important to share a statistic. Consequently, I pulled from the WomensHealth.gov fact sheet to provide that context.

- I am ok with all the changes around the "numbers" of my story but ask that if possible we keep the works "siphoning off" the blood supply rather than "cutting back" as I don't feel it's descriptive enough to truly tell what my daughter was experiencing in the womb.
- Outside of that, I have accepted the lion's share of the changes.

Thank you also for adding in the language I requested around the #MyFibroidsStory / #MyInfertilityStory campaign! I look forward to hearing back from you and finalizing the piece.

Your HOPE Sister,

Gessie J. Thompson

Co-Founder, Hope Beyond Fibroids Elimination Program

Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach

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<u>Download Our Free Hope Beyond Fibroids Elimination TeleSeminar</u> <u>MP3</u>



On Fri, Apr 21, 2017 at 5:17 PM, Allison Hall-Jordan (b)(6) @hagersharp.com>wrote:

Hi Gessie,

Attached please find the edited version of your post. I worked with Valerie to ensure that this meets OWH's style guidelines, including making edits to ensure that it's consumer-friendly.

For the statistic, we would have to include the one on <u>womenshealth.gov</u>. Because it's such a broad range of women impacted by fibroids, we didn't think it strengthened the post, so we recommend not including it.

Lastly, we worked in the language you provided below.

Please let me know if you have any questions about these edits. Once we get the greenlight, this can go through the final round of review at OWH.

Thanks, and have a nice weekend!

Allison

From: Gessie Thompson [mailto: (h)/(@gessiethompson.com)

Sent: Friday, April 21, 2017 3:42 PM

To: Allison Hall-Jordan <(b)(6) @hagersharp.com>; Borden, Valerie

(HHS/OASH) < Valerie. Borden@hhs.gov>

Subject: Re: Blog submission for the Office on Women's Health

Happy Friday Valerie and Alli

I hope this finds you well. I know you're still working to finalize my blog piece. I had a quick question. Next week is "National Fibroids Awareness" and "National Infertility Awareness" week. Can we add a line at the end of the article like this?



In observance of "National Fibroids Awareness" and "National Infertility Awareness" week (April 22 to 29th), we invite you to stop suffering in silence by SHARING YOUR STORY using the hashtags #MyFibroidsStory / #MyInfertilityStory and #NIAW #NFAW. Collectively, we will proclaim that Fibroids and Infertility matter!

I've attached a revised version of the article with this verbiage. Thank you so much!

Your HOPE Sister,

Gessie J. Thompson

Co-Founder, Hope Beyond Fibroids Elimination Program

Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach

P: 718-591-2447

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<u>Download Our Free Hope Beyond Fibroids Elimination</u> <u>TeleSeminar MP3</u>



On Thu, Apr 20, 2017 at 3:39 PM, Gessie Thompson (b)(@gessiethompson.com>wrote:

Excellent! Thank you.

On Thu, Apr 20, 2017 at 3:37 PM Allison Hall-Jordan (b)(6) @hagersharp.com>wrote:

Hi Gessie,

Thanks so much for following up. My apologies on the delayed response. Like Valerie mentioned in her email, I'll review this version to make sure that it coincides with OWH style. We'll be back in touch with you soon with any additional edits or changes.

Thanks! Allison

From: Gessie Thompson [mailto:(b)(@gessiethompson.com]

Sent: Thursday, April 20, 2017 3:11 PM

To: Borden, Valerie (HHS/OASH) < <u>Valerie.Borden@hhs.gov</u>>
Cc: Allison Hall-Jordan < <u>(h)(5)</u> <u>@hagersharp.com</u>>

Subject: Re: Blog submission for the Office on Women's Health

HI Alli,

I hope this finds you well. I just want to ensure you have a version of the blog that corresponds with my response to Valerie's last email so I have attached it here. NOTE: I have also added my website to my About the Author.

For your easy reference, I have pated below my responses sent yesterday:



One quick note regarding the link to estrogen and fibroids. While I understand your desire to use caution around this topic, I feel the language used may be a bit too cautious as there language of the studies--including the OWH and NYS HHS fact sheets both say

- Hormonal (affected by <u>estrogen</u> and <u>progesterone</u> levels) Because no one knows for sure what causes fibroids, we also don't know what causes them to grow or shrink. We do know that they are under hormonal control both estrogen and progesterone. They grow rapidly during pregnancy, when hormone levels are high. They shrink when anti-hormone medication is used. They also stop growing or shrink once a woman reaches menopause
- Female hormones, estrogen and progesterone, cause fibroids to grow. Fibroids grow rapidly during pregnancy, when hormone levels are high and shrink when anti-hormone medicine is used. Fibroids also stop growing or shrink once a woman reaches menopause.

Therefore, I'd ask that we keep the language as I previously wrote it: "Given the known links between estrogen and fibroids, I worked with my naturopathic doctor to eliminate the estrogen from my nutrition plan." It does not state that estrogen is the definitive cause but rather that there are known links. However, I will defer to you in the end.

I understand and am fine with the other corrections and below are my responses to your questions:

- 1. My reference for the percentage statistics is this fact sheet: https://www.nichd.nih.gov/health/topics/uterine/conditioninfo/Pages/peo-ple-affected.aspx
- 2. The 110+ million is equivalent to 70% of the female population recorded by the last census numbers have been as follows:
 - 1. 2010: 308 million x 50.8% (populations of women) = 156.4 million; $156.4 \times 70\%$ (women affected by fibroids) = 109.5 million

Please advise of any further updates. Thank you!

Your HOPE Sister,

Gessie J. Thompson

Co-Founder, Hope Beyond Fibroids Elimination Program

Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach

P: 718-591-2447

F: 646-478-9179

(b)(@gessiethompson.com



www.gessiethompson.com

Read How She Eliminated 50 FIBROIDS Without Surgery!

<u>Download Our Free Hope Beyond Fibroids Elimination</u> <u>TeleSeminar MP3</u>

On Wed, Apr 19, 2017 at 11:02 AM, Gessie Thompson (b)(@gessiethompson.com>wrote:

Hi Valerie,

Thank you for forwarding your changes to the article and I'm glad that it was more in line with your expectations and guidelines for the piece. We're almost there!

One quick note regarding the link to estrogen and fibroids. While I understand your desire to use caution around this topic, I feel the language used may be a bit too cautious as there language of the studies--including the OWH and NYS HHS fact sheets both say

- Hormonal (affected by <u>estrogen</u> and <u>progesterone</u> levels)
 Because no one knows for sure what causes fibroids, we also don't know what causes them to grow or shrink. We do know that they are under hormonal control both estrogen and progesterone. They grow rapidly during pregnancy, when hormone levels are high. They shrink when anti-hormone medication is used. They also stop growing or shrink once a woman reaches menopause
- Female hormones, estrogen and progesterone, cause fibroids to grow. Fibroids grow rapidly during pregnancy, when



hormone levels are high and shrink when anti-hormone medicine is used. Fibroids also stop growing or shrink once a woman reaches menopause.

Therefore, I'd ask that we keep the language as I previously wrote it: "Given the known links between estrogen and fibroids, I worked with my naturopathic doctor to eliminate the estrogen from my nutrition plan."It does not state that estrogen is the definitive cause but rather that there are known links. However, I will defer to you in the end.

I understand and am fine with the other corrections and below are my responses to your questions:

- My reference for the percentage statistics is this fact sheet: https://www.nichd.nih.gov/health/topics/uterine/conditioninfo/Pages/people-affected.aspx
- 2. The 110+ million is equivalent to 70% of the female population recorded by the last census numbers have been as follows:
 - 1. 2010: 308 million x 50.8% (populations of women) = 156.4 million; 156.4 x 70% (women affected by fibroids) = 109.5 million

I hope that helps and I hope you're doing something fun! Thank you again for your help in getting it up to code! :)

Your HOPE Sister,

Gessie J. Thompson

Co-Founder, Hope Beyond Fibroids Elimination Program

Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach

P: <u>718-591-2447</u>

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Read How She Eliminated 50 FIBROIDS Without Surgery!

<u>Download Our Free Hope Beyond Fibroids Elimination</u> <u>TeleSeminar MP3</u>

On Tue, Apr 18, 2017 at 3:22 PM, Borden, Valerie (HHS/OASH) < Valerie.Borden@hhs.gov>wrote:
Hi Gessie,
Thanks for the quick turnaround! This version definitely follows the direction we discussed. We made a few additional edits in the attached version. (b)(5)
(b)(5)

I've copied my colleague Alli on this email so please Reply to All with your citation. She will make sure this post adheres to our style guide (grammar, etc). I want to keep this moving while I'm on travel and without email access for the next two days. (Alli: I'll be back on Friday and will aim to get final OWH sign off then).

Thanks.



Valerie Borden

From: (h)(6 @upliftgroup.com [mailto](h)(6) @upliftgroup.com] On

Behalf Of Gessie Thompson

Sent: Tuesday, April 18, 2017 12:50 PM

To: Borden, Valerie (HHS/OASH)

Subject: Blog submission for the Office on Women's Health

My apologies. This time I'll attach the article. :)

On Tue, Apr 18, 2017 at 12:48 PM, Gessie Thompson (b) @gessiethompson.com>wrote:

Happy Tuesday Valerie,

I hope this finds you well. (b)(6)
(b)(6)

If you go back, you definitely want to do that.

Attached is the revised article and I have also linked below two photo options for your use:

(b)(6)

Thank you again for your guidance. I think I got it right this time. I look forward to your feedback.



Your HOPE Sister,

Gessie J. Thompson

Co-Founder, Hope Beyond Fibroids Elimination Program

Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach

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<u>Download Our Free Hope Beyond Fibroids Elimination</u> TeleSeminar MP3

On Fri, Apr 14, 2017 at 12:37 PM, Borden, Valerie (HHS/OASH) < <u>Valerie.Borden@hhs.gov</u>>wrote:

Hi Gessie,

I like your new approach idea as it removes any concerns we would have with providing medical recommendations.

Thanks for your specific questions. Here are my answers to each:

1. While research may suggest a link between estrogen and fibroids, it is scientifically unclear if estrogen is a causal factor. So we would prefer that you not state it as fact. You can indicate that as a result of this research you took steps to reduce your levels and discuss those.



2. Yes, you can keep in the opening quote if you remove the reference.

3 and 4. We are not only prohibited from promoting products, services and providers, but we also cannot give the appearance of an endorsement. That is why we cannot include your MP3 file even it is free. Yes, we can definitely link to your website in your author byline and bio!

I hope this answers your questions. In terms of a date for returning a revised version, is Tues, April 18 by 4 EST possible? I leave for work travel the next day and would like to get this put in to clearance on Tuesday before I go if possible.

Best and safe travels home,

Valerie Borden

From: (b)(6) @upliftgroup.com [mailto(b)(6) @upliftgroup.com] On

Behalf Of Gessie Thompson

Sent: Thursday, April 13, 2017 7:21 PM

To: Borden, Valerie (HHS/OASH)

Subject: Re: Blog submission for the Office on Women's Health

Hi Valerie,

I hope this finds you well. Yes. Prague is a beautiful city...one of my favorites!

Thank you for forwarding the revised article. Given the changes, I'd like to take a different approach to the article as you've advised--



adding in what helped me personally. I will use the approach taken in the current "Becoming a PCOS Diva" article--meaning, speaking about it from a personal perspective verses a medical recommendation. A few questions:

- 1. If we remove the reference to the doctors, can I still include the content around the fact that research consistently links the growth of fibroids to estrogen and from there speak to how I reduced my estrogen levels by removing the toxins out of my lifestyles through stress management, diet and exercises?
- 2. I see that you removed the first two sentences of my opening quote. Can we keep it in if I simply remove the reference to the book and just use it as an opening quote?
- 3. I see that you've deleted the free MP3 that I linked to the article. This is a free teleseminar that helps women learn more about the lifestyle changes they can make to help manage their fibroids. Is there a way to include this info in the article using different wording?
- 4. I see that the Becoming a PCOS Diva article had two links to her website. The first was in her byline and the other in her author bio. Will this be something I can also do?

Thank you and by when do you need the revised document?

Your HOPE Sister.

Gessie J. Thompson

Co-Founder, Hope Beyond Fibroids Elimination Program

Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach

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<u>Download Our Free Hope Beyond Fibroids Elimination</u> TeleSeminar MP3

Telebentual 1415
On Thu, Apr 13, 2017 at 5:57 PM, Borden, Valerie (HHS/OASH) < Valerie.Borden@hhs.gov>wrote: Hi Gessie,
ni dessie,
I love Prague based on the week I spent there years ago! Hope you are getting good weather as it's a very walkable city.
I apologize for not getting back to you sooner with our edits. The attached has lots of edits but please don't be concerned. The two main things I had to remove were references to your book and the medical doctor who helped you as we are not allowed to promote products or medical professionals by name. In addition I removed the section on the 3 things every woman should know because we will link to our fact sheet on Fibroids: https://www.womenshealth.gov/a-z-topics/uterine-fibroids
We are excited to hear more of your personal story. You can add how diet and exercise helped you, etc., but we cannot include specific dietary recommendations.
Please feel free to email me back with any questions or concerns.
Best,

Valerie Borden



From: (b)(6)@upliftgroup.com [mailto (b)(6) @upliftgroup.com] On

Behalf Of Gessie Thompson

Sent: Tuesday, April 11, 2017 8:06 PM **To:** Borden, Valerie (HHS/OASH)

Subject: Blog submission for the Office on Women's Health

Hi Valerie,

I hope this finds you well. I'm writing to check back in with you on the status of the article. Your last email indicated that you were working on the edits and would be forwarding the final for my review.

The London Women's Health event well and I'm now in Prague on vacation for the week but will be checking email to ensure that I respond to you in a timely manner.

Your HOPE Sister,

Gessie J. Thompson

Co-Founder, Hope Beyond Fibroids Elimination Program

Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach

P: <u>718-591-2447</u>

F: 646-478-9179

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www.gessiethompson.com



Read How She Eliminated 50 FIBROIDS Without Surgery!

<u>Download Our Free Hope Beyond Fibroids Elimination</u> TeleSeminar MP3

On Tue, Apr 4, 2017 at 9:44 PM, Gessie Thompson (b)(@gessiethompson.com>wrote:

Hi Valerie,

Excellent. Thank you and I look forward to seeing them!

Your HOPE Sister,

Gessie

On Tue, Apr 4, 2017 at 4:34 PM Borden, Valerie (HHS/OASH) < Valerie.Borden@hhs.gov>wrote:

Thanks Gessie,

I received your blog and we are putting it through review now. I'll share with you our edits once complete.

Enjoy your time in London!

Valerie Borden



From: (h)(6) @upliftgroup.com [mailto:(h)(6) @upliftgroup.com] On

Behalf Of Gessie Thompson

Sent: Friday, March 31, 2017 5:31 PM

To: Borden, Valerie (HHS/OASH)

--

See-Soar-Succeed ☐, Gessie Thompson President/CEO The UpLift! Group P: 718-591-2447

M: (b)(6)

F: 646-478-9179

<u>(h)(6)</u> @upliftgroup.com www.upliftgroup.com

Sender:	Gessie Thompson
Recipient:	Borden, Valerie (HHS/OASH) ; Bishop-Crawford, Jennifer (OS/OASH)
Sent Date:	2017/10/23 10:50:21
Delivered Date:	2017/10/23 10:51:27



From:	Marshall, Candace (OS/OASH)
To:	Polacek, Aaron (OS/OASH) ; Hurwitz, Emily (HHS/OASH) ; Douglas, Tracie (OS/OASH) (CTR) ; Phenix, Adrianne (HHS/OASH) ; Ceinos, Gustavo (OS/OASH) ; Leggin, Brooke (HHS/OWH) ; Perrotte, Brittany (HHS/OASH) ; Williams, Shalethia (OS/OASH) ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d62da2638cd245be93e91cb94bb19515-Perrotte, B>; Williams, Shalethia (OS/OASH) ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d62da2638cd245be93e91cb94bb19515-Perrotte, B>; Williams, Shalethia (OS/OASH) ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=43a2dd81f1ea44a78038323dc48ce414-Williams, S>
CC:	Bishop-Crawford, Jennifer (OS/OASH) ; Smith, Adrienne M. (OS/OASH) ; Collins Sharp, Beth (OS/OASH/OWH/DPI) ; Greene, Nicole (OS/OASH)
Subject:	RE: Volunteering for OWH/FOH Red Dress Event
Date:	2018/02/12 16:08:33
Priority:	Normal
Туре:	Note

Oh!! I have a few red dress pins, if you are interested.

From: Marshall, Candace (OS/OASH)

Sent: Monday, February 12, 2018 3:47 PM

To: Polacek, Aaron (OS/OASH); Hurwitz, Emily (HHS/OASH); Douglas, Tracie (OS/OASH) (CTR); Phenix, Adrianne (HHS/OASH); Ceinos, Gustavo (OS/OASH); Leggin, Brooke (HHS/OWH); Perrotte, Brittany (HHS/OASH); Williams, Shalethia (OS/OASH)

Cc: Bishop-Crawford, Jennifer (OS/OASH); Smith, Adrienne M. (OS/OASH); Collins Sharp, Beth

(OS/OASH/OWH/DPI); Greene, Nicole (OS/OASH) Subject: Volunteering for OWH/FOH Red Dress Event

Hi Everyone,

Thank you much for volunteering to help with the OWH exhibit tomorrow!! Below is a chart of assignments for the day. Please let me know ASAP if you are no longer able to volunteer.

OWH Exhibit Schedule		
10:00 AM-11:00 AM *	Set-up/ Exhibit	Aaron/ Emily/ Tracie
*event begins at 10:30 AM	See up, Exmore	



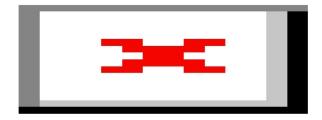
11:00 AM-12:00 PM	Exhibit	Adrianne/ Gustavo
12:00 PM-1:00 PM	Exhibit	Brooke/ Brittany
1:00 PM-2:00 PM * *event ends at 1:30 PM	Exhibit/ Break-Down	Sha/Candace

The Red Dress Fashion show and Exhibit will take place from 10:30 AM— 1:30 PM in the Great Hall. On the exhibit table, we will display OWH publications about heart health and healthy living as well as some information about the office. I've listed them here with a brief description.

- About Us- This one-pager provides an overview of the office and some of our work in women's
 health. I've attached this one so that you can review in advance. The work listed spans across
 divisions so some information may be less familiar.
- Make the Call- This is an OWH campaign to educate women about heart attacks, how to
 recognize the signs and get help. There isn't a fact sheet for Make the Call but we will have some
 of the graphics depicting the commons signs of heart attack for women. A nice this to share
 when passing this out is that the Make the Call information on our website has been updated
 and will be launched at the end of the week.
- OWH Facts sheets on Stroke (English &Spanish)
 This fact sheets provides basics on stroke, key symptoms and what to do if someone feels they are having a stroke.
- OWH Facts sheet on Heart Disease and Women- (English &Spanish)
 This fact sheet provides basic information on heart disease, symptoms in women and how it affects health conditions such as pregnancy and menopause.
- OWH Facts sheet on Heart-Healthy Eating (English & Spanish)
 This fact sheet provides information on what foods can help lower and increase the risk for heart disease and stroke.

As people are coming to the table, they may be interested in getting more information about women's health information that's not heart health related. No worries, we can handle that! Please direct them to the About Us fact sheet. On the bottom of Page 2, the address for our website is listed. One the homepage, people can sign up for regular women's health updates from the office. Also listed our social media channels that people can follow.





Please let me know if you have any questions. There is no special dress but since the event is about heart health, feel free to wear your red!

See you all tomorrow!! Thanks again!! Candace

Candace Marshall, MPH Health Communications Specialist



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

Email: Candace.Marshall@hhs.gov

Main: 202-690-7650 | Direct: 202-690-5414

Sender:	Marshall, Candace (OS/OASH)
Recipient:	Polacek, Aaron (OS/OASH) ; Hurwitz, Emily (HHS/OASH) ; Douglas, Tracie (OS/OASH) (CTR) ; Phenix, Adrianne (HHS/OASH) ; Ceinos, Gustavo (OS/OASH)



(FYDIBOHF23SPDLT)/cn=Recipients/cn=2acfc0cbf99243f18aa76c4d9c6014ed-Seinos, Gus>; Leggin, Brooke (HHS/OWH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7d8177b2d8e041769bf3ddab0103f6ce-Leggin, Bro>; Perrotte, Brittany (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d62da2638cd245be93e91cb94bb19515-Perrotte, B>; Williams, Shalethia (OS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=43a2dd81f1ea44a78038323dc48ce414-Williams, S>; Bishop-Crawford, Jennifer (OS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=39a84338d5c743fc9cd63a2fdaaefcdb-Bishop-Craw>; Smith, Adrienne M. (OS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfea3ab6a7704cb184da98b18efe8e56-Smith, Adri>; Collins Sharp, Beth (OS/OASH/OWH/DPI) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3162cd18b6fe4e3f894fd7ff80c0e17d-CollinsShar>; Greene, Nicole (OS/OASH) </o>ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=66bf54ed301743d0b71473b5b9f57502-Greene, Nic>

Sent Date: 2018/02/12 16:08:30

Delivered Date: 2018/02/12 16:08:33



Silver, Karen (OS/OASH)
Bishop-Crawford, Jennifer (OS/OASH)
Abercrombie, Ann (HHS/OASH)
RE: girlshealth badge?
2017/04/04 14:22:10
Normal
Note
() K () F (2) N

Thanks! (And, Ann, I thought of you but for some reason thought you were out of the office this week. ☺)

Karen

Karen Silver

Senior Advisor for Communications and Outreach

Office of Populations Affairs (OPA)

Email: Karen.Silver@hhs.gov | Phone: (240) 453-2802

Website: www.hhs.gov/opa/



cid:image001.png@01D2936D.CD0C7630

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Tuesday, April 04, 2017 2:21 PM

To: Silver, Karen (OS/OASH) **Cc:** Abercrombie, Ann (HHS/OASH) **Subject:** RE: girlshealth badge?

Hi Karen,

You are a favorite! Ann Abercrombie is our girls health lead, and she will respond and let you know what we do have available and what your options are \odot .

Best, Jenn

From: Silver, Karen (OS/OASH)

Sent: Tuesday, April 04, 2017 2:13 PM **To:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: girlshealth badge?

Hi Jenn,

It's your favorite comms person in OPA (I feel safe saying that since I am the only one these days ;-)).

We are updating our website fact sheet content and incorporating a whole new design (no more PDFs!). When it's relevant for certain topics, we do link to <u>Girlshealth.gov</u>: <u>Types of Birth</u> <u>Control</u>, for example, in the Resources section at the bottom of the new pages. I don't think we



get a lot of teens coming to our site but I thought it might be nice to include a badge or some sort of graphic more prominently on the page for when we do.

I was poking around on the site and didn't see one. Is there a badge available or something else you'd recommend?

Hope you're doing well!

Karen

Karen Silver

Senior Advisor for Communications and Outreach

Office of Populations Affairs (OPA)

Email: Karen.Silver@hhs.gov | Phone: (240) 453-2802

Website: www.hhs.gov/opa/



cid:image001.png@01D2936D.CD0C7630

Sender:	Silver, Karen (OS/OASH)
Recipient:	Bishop-Crawford, Jennifer (OS/OASH) ; Abercrombie, Ann (HHS/OASH)
Sent Date:	2017/04/04 14:22:10



From:	Bishop-Crawford, Jennifer (OS/OASH)
То:	Thompson, Cheryl (OS/OASH)
Subject:	RE: Region 7 National OWH Visit Agenda.docx 090517.docx
Date:	2017/09/06 15:32:00
Priority:	Normal
Туре:	Note

(b)(5)

Which fact sheet are you referring to?

From: Thompson, Cheryl (OS/OASH)

Sent: Wednesday, September 06, 2017 3:29 PM **To:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Region 7 National OWH Visit Agenda.docx 090517.docx

I added them as a reminder from the list on the Website (fact sheet).

Cheryl J. Thompson, MSPH

Public Health Advisor/Regional Women's Health Liaison



OWH logo 150

Office on Women's Health U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Washington, DC 20201

E-mail: cheryl.thompson@hhs.gov Telework: Wednesday and Friday

Main: 202-690-7650 | Direct: 202-205-2551

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Wednesday, September 06, 2017 3:27 PM

To: Thompson, Cheryl (OS/OASH)

Subject: RE: Region 7 National OWH Visit Agenda.docx 090517.docx

(b)(5)

From: Thompson, Cheryl (OS/OASH)

Sent: Wednesday, September 06, 2017 3:24 PM **To:** Bishop-Crawford, Jennifer (OS/OASH)

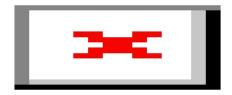
Subject: Region 7 National OWH Visit Agenda.docx 090517.docx

Hi Jenn.



Apologies for not coming over immediately following the RWHC meeting. The call went over





This is the flight that Syreeta found that allows us plenty of time for a meeting in KC.

Cheryl

Sender:	Bishop-Crawford, Jennifer (OS/OASH)
Recipient:	Thompson, Cheryl (OS/OASH)
Sent Date:	2017/09/06 15:32:41
Delivered Date:	2017/09/06 15:32:00



	Leggin, Brooke (HHS/OWH)
То:	Bishop-Crawford, Jennifer (OS/OASH)
Subject:	RE: Marketplace widget request from the past
Date:	2017/03/09 12:18:29
Priority:	Normal
Туре:	Note

(b)(5)

From: Leggin, Brooke (HHS/OWH)

Sent: Thursday, March 09, 2017 10:51 AM **To:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: Marketplace widget request from the past

This was the original request to put the badge on our website. (b)(5) (b)(5)

From: Darcy Sawatzki [mailto:dsawatzki@hagersharp.com]

Sent: Tuesday, January 22, 2013 1:12 PM

To: 'Leggin, Brooke (HHS/OWH)'; 'Yvonne Bersofsky'; Thy @palladianpartners.com'

Cc: Abercrombie, Ann (HHS/OASH)

Subject: RE: I'm so sorry - another emergency request for today...

Thanks Brooke- identifying the places where the widgets should go is a big help.

From: Leggin, Brooke (HHS/OWH) [mailto:Brooke.Leggin@hhs.gov]

Sent: Tuesday, January 22, 2013 1:08 PM

To: 'Yvonne Bersofsky'; 'AN' @palladianpartners.com' **Cc:** Abercrombie, Ann (HHS/OASH); Darcy Sawatzki

Subject: I'm so sorry - another emergency request for today...

Importance: High

Valerie is getting a lot of pressure to post the widget at the bottom of the page at

(b)(5)



(b)(5)		

Thanks.

Brooke

Brooke Leggin

Program Analyst

Office on Women's Health, DHHS

t: 202-205-2373 f: 202-205-2631

200 Independence Ave, SW, Room 730F, Washington, DC 20201

brooke.leggin@hhs.gov

Sender:	Leggin, Brooke (HHS/OWH)
Recipient:	Bishop-Crawford, Jennifer (OS/OASH)
Sent Date:	2017/03/09 12:18:28
Delivered Date:	2017/03/09 12:18:29



From:	Christensen, Heidi (HHS/CFBNP)
To:	OS Partnerships (HHS/OS)
Subject:	This WEEK: HHS Community Health News March 12- 16
Date:	2018/03/12 11:05:36
Priority:	Normal
Туре:	Note

Friends, Please do not hesitate to reach out with any questions or with a request for additional information on any of the news items, program listings, or resources below.

New Reports on the Opioid Epidemic's Impact on ER Visits and the Child Welfare System

Opioid Overdoses Treated in Emergency Departments

The Centers for Disease Control and Prevention (CDC) released a *Vital Signs* report showing that emergency department visits for suspected opioid overdoses increased 30 percent in all parts of the U.S. from July 2016 through September 2017. In addition to highlighting that opioid overdoses increased for men and women, across all age groups, and in all regions, the report helps us see how communities, law enforcement, the medical community, public health and government can work together in this fight. Click here for the full *Vital Signs* report, news release, fact sheet, and other public engagement material — including a data-rich, one-minute video.

WEBINAR Coordinating Clinical and Public Health Responses to Opioid Overdoses Treated in Emergency Departments

Tues., March 13, from 2:00 - 3:30 p.m. ET

Join the 20th U.S. Surgeon General, Acting CDC Director, CDC officials and other subject-matter experts for a webinar to discuss the latest data, indicating that rates of overdoses treated in emergency departments are rising across all regions and require a coordinated response between public health, clinicians, public safety, and community organizations.

Learn more here.

Follow CDC through Twitter <u>@CDCgov</u> and on <u>Facebook</u>, to spread the news and help fight our opioid epidemic!

<u>The Relationship between Substance Use Prevalence and Child Welfare</u> Caseloads

The Assistant Secretary of Planning and Evaluation (ASPE) has just released the following two briefs considering the relationship between the opioid epidemic



and increased child welfare caseloads. After more than a decade of sustained declines in the national foster care caseload, beginning in 2012, the number of children entering foster care began to rise. While many believe parental substance use – including prescription drugs, illicit drugs and alcohol, and especially opioids – has been the primary cause of the increase in foster care placements, thus far there has been little empirical evidence to support this assertion.

A series of research briefs will describe the study's findings. Links to individual briefs appear below. Additional briefs will be added as they become available throughout 2018.

- •Substance use, the Opioid Epidemic and the Child Welfare System: Key Takeaways from a Mixed Methods Study
- The Relationship between Substance Use Prevalence and Child Welfare Caseloads

Upcoming Webinar on Building Community Capacity

NEW! Opioid Epidemic: Strengthening Your Community's Capacity to Connect to Vital Services and Support

Wed. March 28, 12:00 - 1:00 p.m ET Register here.

Faith and community leaders are seizing the opportunity to strengthen their response to the current opioid epidemic. With the help of local experts, they are learning how to respond to an emergency, provide on-going recovery support, and even make referrals to treatment.

Join the HHS Partnership Center, **Monty Burks**, State Director of Special Projects and Faith-based Initiative for the Tennessee Department of Mental Health and Substance Abuse Services, and **Kevin Hoffman**, President and Program Director of Three Oaks Center in Dayton, Ohio, to learn how faith and community—based leaders are joining their compassion with a proven expertise that's bringing hope and healing to their communities.

Please help us promote this learning opportunity by sharing our "pinned" post on your social media channels: https://twitter.com/PartnersforGood

HHS Community Health News and Resources

Value-based Transformation of America's Healthcare System

On March 8, HHS Secretary Azar provided remarks to America's Health Insurance Plans members on the challenge and opportunities of transforming our healthcare system from paying for procedures and sickness to one of value and outcomes.



Consumer Advisory: Older Adults and Medication Safety

Older Adults and Medication Safety is part of the Eldercare Locator's Critical Conversations series of fact sheets, which address emerging topics and important issues impacting the health and well-being of older adults. It is a new fact sheet for the Eldercare Locator website on medication safety and older adults with a special section on opioids. This project was supported, in part, by from the U.S. Administration for Community Living, Department of Health and Human Services.

How Do Drugs Change Your Brain? Test Your Knowledge

Share this quiz with your teens from the National Institute on Drug Abuse for Teens. Did you know drugs can change how well your brain works? Take the quiz to learn more: http://bit.ly/2CZrf5m

Grant Information

geographic service areas.

Fiscal Year 2018 Title X Services Funding Opportunity Announcement
The new funding opportunity announcement (FOA) for the Title X family
planning program was released on February 23rd. These grants will assist in the
establishment and operation of voluntary family planning projects that will offer
a broad range of acceptable and effective family planning methods and services
including natural family planning methods, infertility services, and services for
adolescents. This funding announcement (PA-FPH-18-001) is for all 60

Applications for the Title X family planning services grants are due May 24, 2018 at 6 p.m. ET. The grants are expected to begin in September of this year.

You can read the full <u>funding opportunity</u> announcement (PDF) and the FOA Q&A document here.

WEBINAR: Thurs., March 22, 2018, 2 p.m. ET <u>technical assistance webinar</u> for the FOA will be on.

Participants can also join the event directly at:

https://www.mymeetings.com/nc/join.php?i=PWXW7109625&p=7340934&t=c

With great thanks for all you do in communities across the country, Heidi and the team at the Partnership Center

Heidi Christensen, Public Affairs Specialist Center for Faith-based and Neighborhood Partnerships/IEA/OS U.S. Department of Health and Human Services 200 Independence Ave. SW, Washington D.C. 20201



(202) 260-3595, @PartnersforGood

Christensen, Heidi (HHS/CFBNP)	
Recipient: OS Partnerships (HHS/OS)	
Sent Date:	2018/03/12 11:05:25
Delivered Date:	2018/03/12 11:05:36



From:	Bishop-Crawford, Jennifer (OS/OASH)	
То:	Leggin, Brooke (HHS/OWH)	
Subject:	RE: Website content for your review: Fibroids and Urinary incontinence	
Date:	2017/06/27 10:26:00	
Priority:	Priority: Normal	
Туре:	Note	

(b)(5)

From: Leggin, Brooke (HHS/OWH) **Sent:** Tuesday, June 27, 2017 10:26 AM **To:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: FW: Website content for your review: Fibroids and Urinary incontinence

Importance: High

Just wanted you to see Beth's comment below about the timeframe.

From: Collins Sharp, Beth (OS/OASH/OWH/DPI)

Sent: Tuesday, June 27, 2017 10:08 AM

To: Leggin, Brooke (HHS/OWH)

Subject: RE: Website content for your review: Fibroids and Urinary incontinence

Hi Brooke,

Here you go. I understand now why these take so long to review. (b)(5)

(b)(5)

Thanks for including me.

Beth

From: Leggin, Brooke (HHS/OWH)

Sent: Wednesday, June 21, 2017 7:51 AM **To:** Collins Sharp, Beth (OS/OASH/OWH/DPI)

Subject: RE: Website content for your review: Fibroids and Urinary incontinence

No worries, I'm still catching up from vacation myself! Thank you!

From: Collins Sharp, Beth (OS/OASH/OWH/DPI)

Sent: Tuesday, June 20, 2017 7:45 PM

To: Leggin, Brooke (HHS/OWH)

Subject: RE: Website content for your review: Fibroids and Urinary incontinence

I brought it on vacation with me. Finally not exhausted so I'll get it to you shortly. This one was much easier.



From: Leggin, Brooke (HHS/OWH) **Sent:** Friday, June 02, 2017 2:00 PM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI)

Subject: Website content for your review: Fibroids and Urinary incontinence

Hello!

Sayeedha was very happy to hear that you were willing to take some of the workload from her with regard to reviewing our website content from an OWH clinician perspective. Thank you for volunteering!



Let me know if you have any other questions! Thank you! Brooke

Brooke Leggin

Web and Community Manager



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: <u>brooke.leggin@hhs.gov</u>
Work Hours: 7:30 am to 4:00 pm ET

Main: 202-690-7650 | Direct: M, Th, F 202-205-2373 T, W 301-864-2607

Websites: www.womenshealth.gov | www.girlshealth.gov OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov Connect with us on: Twitter | Facebook | YouTube

Sender:	Bishop-Crawford, Jennifer (OS/OASH)
Recipient:	Leggin, Brooke (HHS/OWH)
Sent Date:	2017/06/27 10:26:51



Delivered Date: 2017/06/27 10:26:00



From:	Bishop-Crawford, Jennifer (OS/OASH)		
То:	Borden, Valerie (HHS/OASH)		
Subject:	RE: Concern for PCOS Diva blog post featured on website		
Date:	2017/04/21 16:43:00		
Priority:	Normal		
Туре:	Note		

Hi Val,

Nicely written response. Please have it sent forward under the Office on Women's Health signature. Let's discuss these kinds of blogs a bit more moving forward. This and Gessie's Blog is making me think about how to approach these complimentary/alternative medical cures and I don't want our office to be put in the middle of these kinds of debates, particularly when we some claims are grounded in specious research.

----Original Message----

From: Borden, Valerie (HHS/OASH) Sent: Friday, April 21, 2017 4:37 PM To: Bishop-Crawford, Jennifer (OS/OASH)

Subject: FW: Concern for PCOS Diva blog post featured on website

Jenn, Please read from the bottom up. I provided a response to this woman's complaints about our PCOS blog. Please let me know if you have any edits.

Val -----

Angela,

Thank you for your comments regarding our guest blog post on PCOS. The Office on Women's Health's blog criteria specifies that the guest writer provide commentary, data, or information on a women's health issue that the Office on Women's Health is interested in covering on the blog. We know that PCOS is a topic of interest among our followers. We also understand there is disagreement in the patient community about what works best for the treatment of PCOS. We are grateful for what your organization offers in terms of diet and nutrition information for women with PCOS. Feel free to engage in a discussion of the blog post on our Facebook page. Our comment policy is under the Collaborate with Us section at: https://www.womenshealth.gov/about-us/work-us/collaborate-us.

Thank you for providing the two additional non-profit resources. These have been shared with the web team and will be added to the fact sheet within the next few months.

Please let us know if we can reach out to you or someone you recommend if we have more content on this topic in the future.

Thank you again for your feedback.

OWH Team (or from you Jenn if you prefer)

-----Original Message-----

From: Leggin, Brooke (HHS/OWH) Sent: Wednesday, April 12, 2017 1:42 PM To: Borden, Valerie (HHS/OASH)

Cc: Phenix, Adrianne (HHS/OASH); Womenshealth

Subject: FW: Concern for PCOS Diva blog post featured on website

Hi Valerie,

Can you draft a response to this person about a recent blog post? Adrianne can provide standard language for her other



suggestion about additional organizations to list on the website.

Thanks. Brooke

----Original Message-----From: Womenshealth

Sent: Wednesday, April 12, 2017 1:39 PM

To: Leggin, Brooke (HHS/OWH)

Subject: FW: Concern for PCOS Diva blog post featured on website

Hi Brooke,

Please let me know how you would like to respond to Angela's concerns.

Thanks,

ΑP

----Original Message----

From: Angela Grassi [mailto possition.com]

Sent: Wednesday, April 12, 2017 10:17 AM

To: Womenshealth

Subject: Concern for PCOS Diva blog post featured on website

To Whom it May Concern,

I was disappointed and concerned to see a blog post written by Amy Medling, the "PCOS Diva" on the U.S. Department of Health and Human Services Office on Women's Health website. Amy Medling received her health coaching certificate after completing a 1 year online course through the Integrative Institute for Nutrition. In contrast, registered dietitian nutritionists such as myself, are required to have a bachelor's degree in nutrition, complete a 12 month internship, and successful pass an exam to be an RDN. We also have to complete 75 hours every five years in continuing education credits to stay an RDN.

As an RDN who specializes in PCOS and a women with the condition, I am concerned about the message U.S. Department of Health and Human Services Office on Women's Health conveys to its readers with PCOS by featuring this blog post. I realize you have a disclaimer that states "these statements and opinions in this blog post are those of the author and do not necessarily represent the views of the U.S.

Department of Health and Human Services Office on Women's Health"

however, by featuring this blog post, you are exposing women with PCOS to inaccurate advice and provide an option to seek out more information from her.

Women with PCOS have been found to have a 4 times higher rate of developing an eating disorder. I have found some of the information provided by Amy Medling to be inaccurate, false, and harmful. For example, in the past she recommended women take d-chiro inositol which was found to worsen egg quality in women with PCOS, advised women to take green coffee bean extract because it gave her "clarity" and recommends women take berberine for acne treatment. The promotion of gluten-free and dairy free diets to women with PCOS which she stated in her blog post on the Women's Health.gov site is worrisome. There is no such research to back up these claims. How can U.S. Department of Health and Human Services Office promote content from someone who does not base her work on evidence and allow false claims to be presented on their website?

I encourage you to remove this blog post.

I would be happy to assist you in providing evidence-based nutrition recommendations to women with PCOS for your website or other publications.

As a side note, I also noticed the U.S. Department of Health and Human Services Office on Women's Health listing the PCOS Foundation as a non-profit organization for women with PCOS. This non-profit is no longer active. May I suggest 2 great non-profits for women with PCOS:

PCOS Challenge, the largest which has a scientific advisory panel and PCOS Awareness Association.

I look forward to your response.

Sincerely,

Angela Grassi, MS, RDN, LDN



Founder, PCOS Nutrition Center

--

Angela Grassi, MS, RD, LDN The PCOS Nutrition Center 14 S. Bryn Mawr Avenue, Suite 204 Bryn Mawr, PA 19010 (484) 252-9028 www.PCOSnutritionCenter.com

Author, PCOS: The Dietitian's Guide, 2nd edition, &The PCOS Workbook:

Your Guide to Complete Physical and Emotional Health and The PCOS Nutrition Center Cookbook Sign up for FREE PCOS

lutrition Tips

Linked In: http://www.linkedin.com/in/angelagrassi Facebook: https://www.facebook.com/PCOSnutrition

Twitter:@PCOSnutrition

	macrier coordanton			
Bishop-Crawford, Jennifer (OS/OASH)		Bishop-Crawford, Jennifer (OS/OASH)		
Recipient: Borden, Valerie (HHS/OASH) <th>Borden, Valerie (HHS/OASH) </th>		Borden, Valerie (HHS/OASH)		
	Sent Date:	2017/04/21 16:43:44		
	Delivered Date:	2017/04/21 16:43:00		



From:	Bishop-Crawford, Jennifer (OS/OASH)	
То:	Woods, Caira (HHS/OASH)	
Subject: RE: fwd: SPS00380218 - Eating Disorders signed by 41 Members of Congress regarding provision in 21st Century Cures statute.		
Date:	2017/06/27 10:21:00	
Priority:	Priority: Normal	
Туре:	Note	

Caira,

(b)(5)

Please let me know if you have any other questions.

Jenn

From: Woods, Caira (HHS/OASH) **Sent:** Tuesday, June 27, 2017 10:04 AM

To: Greene, Nicole (OS/OASH); Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: fwd: SPS00380218 - Eating Disorders signed by 41 Members of Congress regarding a

provision in 21st Century Cures statute.

Is this the link to the new content? (b)(5)

(b)(5)

From: Greene, Nicole (OS/OASH) **Sent:** Thursday, June 22, 2017 1:52 PM

To: Evans, Syreeta (OS/OASH)

Cc: Nixon, Emmett (HHS/OASH); Williams, Shalethia (OS/OASH); Berryman-Gordon, Melanie

(HHS/OASH); Woods, Caira (HHS/OASH)

Subject: RE: fwd: SPS00380218 - Eating Disorders signed by 41 Members of Congress regarding a

provision in 21st Century Cures statute.

(b)(5)

Thank you!

From: Evans, Syreeta (OS/OASH)

Sent: Thursday, June 22, 2017 11:39 AM

To: Greene, Nicole (OS/OASH)

Cc: Nixon, Emmett (HHS/OASH); Evans, Syreeta (OS/OASH); Williams, Shalethia (OS/OASH);



Berryman-Gordon, Melanie (HHS/OASH); Woods, Caira (HHS/OASH) **Subject:** fwd: SPS00380218 - Eating Disorders signed by 41 Members of Congress regarding a provision in 21st Century Cures statute.

SWIFT Clearance Task

Deadline: 6/28/2017

Response Directions:

- Please open and review the documents on the web page linked below. Contact the sender of this email if you are unable to open the linked documents. Access to linked content may not be granted to recipients outside the agency.

Attachments:

(b)(5)		
$(\mathcal{O})(\mathcal{O})$		

Sender: Bishop-Crawford, Jennifer (OS/OASH)	
Recipient: Woods, Caira (HHS/OASH)	
Sent Date:	2017/06/27 10:21:25
Delivered Date: 2017/06/27 10:21:00	



From:	Kimberly Varner @hagersharp.com>	
To:	(h)(6)	
CC:	Darcy Sawatzki < Day(A) Dhagersharp.com>; Abercrombie, Ann (HHS/OASH) ; Bishop-Crawford, Jennifer (OS/OASH) ; Phenix, Adrianne (HHS/OASH)	
Subject:	pject: Temporary NWGHAAD Site	
Date:	Date: 2017/02/28 11:58:01	
Priority:	rity: Normal	
Туре:	Note	

Temporary NWGHAAD Site

Ann – Please see our initial thoughts on how best to update the website and make it live again, while the XOXO is being revised. Palladian can have the site up relatively quickly, as soon as they receive approval on the proposed modifications. To aid the approval process, they can make the proposed edits available to preview on their test server.

Recommended edits to pages/materials that had the XOXO image are as follows:

- Landing page Remove the XOXO we don't need the NWGHAAD logo because it is at the top of the page
- About Us Remove the XOXO we don't need the NWGHAAD logo because it
 is at the top of the page
- Social Media Tools Hide until documents are updated with new XOXO.
- Resources: Fact Sheets and Posters Edit the "Resources" page to just have links to the (HTML-only) fact sheet and the "Ideas for Supporting NWGHAAD" pages. Everything else should flow fine with the XOXO graphic removed.
- **Blog posts** HS is revising now to ensure links do not go to social media tools. Should not be impacted.

We look forward to your review and approval of this temporary plan. A more in-depth plan and status of actions taken to date, is forthcoming.

Kim

KIM VARNER, MA

Senior Account Supervisor

1030 15TH STREET NW, SUITE 600E WASHINGTON, DC 20005



WWW.HAGERSHARP.COM

D 202.706.7404



cid:C4E50C46-9AC0-4C7D-8E5C-D2B678C9FB60

Sender:	Kimberly Varner <(b)(6)@hagersharp.com>
Recipient:	Darcy Sawatzki < Darcy
Sent Date:	2017/02/28 11:57:09
Delivered Date:	2017/02/28 11:58:01



From:	Collins Sharp, Beth (OS/OASH/OWH/DPI) ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=3162CD18B6FE4E3F894FD7FF80C0E17D- COLLINSSHAR>	
Bishop-Crawford, Jennifer (OS/OASH)		
Subject:	Subject: Re: Fact Sheets & Content Areas for Alan & Sayeedha review	
Date:	Date: 2017/05/24 06:13:44	
Priority:	ity: Normal	
Туре:	Note	

Hi all, I like this plan a lot. (b)(5)

And thank you for including me. It fuels the nurse part of me.

Best, Beth

On: 23 May 2017 15:25, "Bishop-Crawford, Jennifer (OS/OASH)" <Jennifer.Bishop-Crawford@hhs.gov>wrote:

Hi Ladies,

(b)(5)

Best, Jenn

From: Leggin, Brooke (HHS/OWH) **Sent:** Monday, May 15, 2017 9:59 AM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Smith, Adrienne M. (OS/OASH)

Cc: Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Fact Sheets & Content Areas for Alan & Sayeedha review

(b)(5)



b)(5)	

I know that Sayeedha's and Alan's feedback has already improved our content and I'm grateful for their time. This is the list of fact sheets they've already completed a review of, along with the page count.

Fact Sheet or Content Area	OWH Clinical Reviewer	Number of Word Pages
Heart Disease and Stroke	Alan Simon	101
Bleeding Disorders	Alan Simon	10
Anorexia	Alan Simon	9
Bulimia	Alan Simon	9
Binge Eating Disorder	Alan Simon	9



Viral Hepatitis	Alan Simon	20
Vital Hepatitis	Addition	20
COPD	Alan Simon	10
Oral Health	Alan Simon	11
Birth Control	Sayeedha Uddin	17
Emergency Contraception	Sayeedha Uddin	9
Bladder Pain	Sayeedha Uddin	11
Lupus	Sayeedha Uddin	30
Menstruation and Menopause	Sayeedha Uddin	92

Thanks, Brooke

From: Collins Sharp, Beth (OS/OASH/OWH/DPI)

Sent: Friday, May 12, 2017 9:31 AM

To: Bishop-Crawford, Jennifer (OS/OASH); Smith, Adrienne M. (OS/OASH)

Cc: Leggin, Brooke (HHS/OWH)

Subject: RE: Fact Sheets & Content Areas for Alan & Sayeedha review

(b)(5)

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Thursday, May 11, 2017 3:20 PM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Smith, Adrienne M. (OS/OASH)

Cc: Leggin, Brooke (HHS/OWH)

Subject: RE: Fact Sheets & Content Areas for Alan & Sayeedha review

(b)(5)

Jenn

From: Collins Sharp, Beth (OS/OASH/OWH/DPI)

Sent: Thursday, May 11, 2017 3:20 PM

To: Bishop-Crawford, Jennifer (OS/OASH); Smith, Adrienne M. (OS/OASH)

Cc: Leggin, Brooke (HHS/OWH)

Subject: RE: Fact Sheets & Content Areas for Alan & Sayeedha review



Thanks, I understand better. If I can help, I'm happy to. But it sounds like the most helpful thing I can do is free up some time for Alan. How would you like to proceed?

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Thursday, May 11, 2017 2:02 PM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Smith, Adrienne M. (OS/OASH)

Cc: Leggin, Brooke (HHS/OWH)

Subject: RE: Fact Sheets & Content Areas for Alan & Sayeedha review



From: Collins Sharp, Beth (OS/OASH/OWH/DPI)

Sent: Thursday, May 11, 2017 1:09 PM

To: Leggin, Brooke (HHS/OWH); Smith, Adrienne M. (OS/OASH)

Cc: Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review

(b)(5)	
(b)(5)	Let me know if you need more. Thanks!

From: Leggin, Brooke (HHS/OWH) Sent: Monday, May 08, 2017 10:24 AM

To: Smith, Adrienne M. (OS/OASH); Collins Sharp, Beth (OS/OASH/OWH/DPI)

Cc: Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Fact Sheets & Content Areas for Alan & Sayeedha review

Thanks for working on this. I'm grateful for Alan and Sayeedha's assistance with our website health content and I don't want to overwhelm them with all of the content we're going to receive in the next month.

Here is an updated list as of this morning:

Topic	Page Count	Status
(b)(5)		



Page 065

Withheld pursuant to exemption

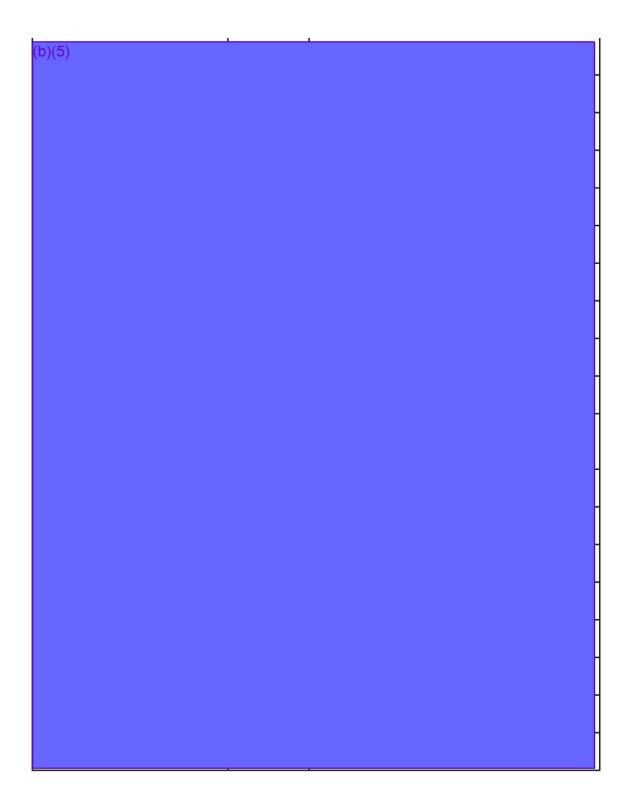
(b)(5)

of the Freedom of Information and Privacy Act



(b)(5)		
From: Bishop-Crawford, Jennifer Sent: Friday, May 05, 2017 4:12 To: Smith, Adrienne M. (OS/OAS Cc: Leggin, Brooke (HHS/OWH) Subject: FW: Fact Sheets &Cont Hi Ladies,	PM H); Collins Sh	
Per the email below, (b)(5)		I'll come to each of you on Monday to
discuss individually or set up a tin Jenn	ne to chat.	
From: Leggin, Brooke (HHS/OWI Sent: Friday, May 05, 2017 4:00 To: Bishop-Crawford, Jennifer (C Subject: Fact Sheets &Content A	PM S/OASH)	&Sayeedha review
(b)(5)		
Topic	Page Count	Status
(b)(5)		





Brooke Leggin

Web and Community Manager





OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: brooke.leggin@hhs.gov Work Hours: 7:30 am to 4:00 pm ET

Main: 202-690-7650 | Direct: M, Th, F 202-205-2373 T, W 301-864-2607

Websites: www.womenshealth.gov | www.girlshealth.gov OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov Connect with us on: Twitter | Facebook | YouTube

Sender:	Collins Sharp, Beth (OS/OASH/OWH/DPI) ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=3162CD18B6FE4E3F894FD7FF80C0E17D- COLLINSSHAR>
Recipient:	Bishop-Crawford, Jennifer (OS/OASH) ; Leggin, Brooke (HHS/OWH) ; Smith, Adrienne M. (OS/OASH)
Sent Date:	2017/05/24 06:13:42
Delivered Date:	2017/05/24 06:13:44



From:	Collins Sharp, Beth (OS/OASH/OWH/DPI) ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=3162CD18B6FE4E3F894FD7FF80C0E17D- COLLINSSHAR>
To:	Smith, Adrienne M. (OS/OASH) ; Bishop-Crawford, Jennifer (OS/OASH) ; Leggin, Brooke (HHS/OWH)
Subject:	RE: Fact Sheets & Content Areas for Alan & Sayeedha review
Date:	2017/05/31 11:16:40
Priority:	Normal
Туре:	Note

(b)(5)			

From: Smith, Adrienne M. (OS/OASH) Sent: Wednesday, May 24, 2017 10:09 AM

To: Bishop-Crawford, Jennifer (OS/OASH); Leggin, Brooke (HHS/OWH); Collins Sharp, Beth

(OS/OASH/OWH/DPI)

Subject: RE: Fact Sheets & Content Areas for Alan & Sayeedha review

(b)(5)		

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Tuesday, May 23, 2017 3:25 PM

To: Leggin, Brooke (HHS/OWH); Collins Sharp, Beth (OS/OASH/OWH/DPI); Smith, Adrienne M.

(OS/OASH)

Subject: RE: Fact Sheets & Content Areas for Alan & Sayeedha review

Hi Ladies, (b)(5)		
(b)(5)		

Please let me know if this is a realistic approach to this problem.

Best, Jenn

> From: Leggin, Brooke (HHS/OWH) Sent: Monday, May 15, 2017 9:59 AM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Smith, Adrienne M. (OS/OASH)

Cc: Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review



Page 070
Withheld pursuant to exemption
(b)(5)

of the Freedom of Information and Privacy Act



(b)(5)	
Thanks, Brooke	
From: Collins Sharp, Beth (OS/OASH/OWH/DPI) Sent: Friday, May 12, 2017 9:31 AM To: Bishop-Crawford, Jennifer (OS/OASH); Smith, Adrienne M. (OS/OASH) Cc: Leggin, Brooke (HHS/OWH) Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review	
(b)(5)	
From: Bishop-Crawford, Jennifer (OS/OASH) Sent: Thursday, May 11, 2017 3:20 PM To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Smith, Adrienne M. (OS/OASH) Cc: Leggin, Brooke (HHS/OWH) Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review	_
The real question is whether or not that is possible? If so can we set some guidelines as to the turnaround time for these documents? Jenn	
From: Collins Sharp, Beth (OS/OASH/OWH/DPI) Sent: Thursday, May 11, 2017 3:20 PM To: Bishop-Crawford, Jennifer (OS/OASH); Smith, Adrienne M. (OS/OASH) Cc: Leggin, Brooke (HHS/OWH) Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review	
(b)(5)	

From: Bishop-Crawford, Jennifer (OS/OASH) Sent: Thursday, May 11, 2017 2:02 PM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Smith, Adrienne M. (OS/OASH)

Cc: Leggin, Brooke (HHS/OWH)

Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review

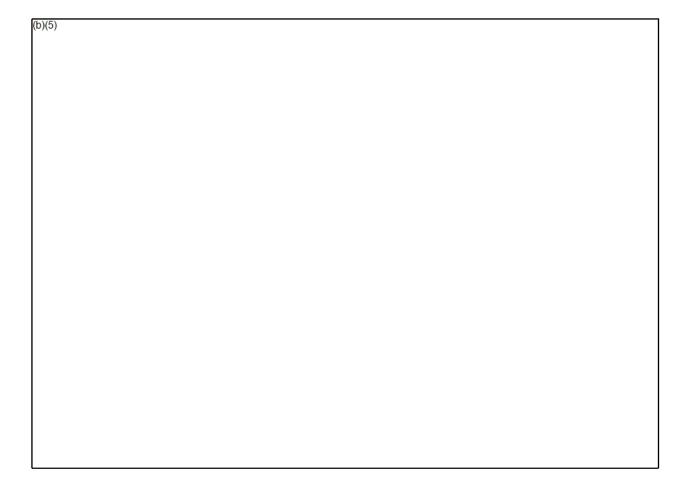


	_
(b)(5)	
	_
Best,	
Jenn	
From: Collins Sharp, Beth (OS/OASH/OWH/DPI)	
Sent: Thursday, May 11, 2017 1:09 PM	
To: Leggin, Brooke (HHS/OWH); Smith, Adrienne M. (OS/OASH)	
Cc: Bishop-Crawford, Jennifer (OS/OASH)	
Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review	
,	
b)(5)	
From: Leggin, Brooke (HHS/OWH)	
Sent: Monday, May 08, 2017 10:24 AM	
To: Smith, Adrienne M. (OS/OASH); Collins Sharp, Beth (OS/OASH/OWH/DPI)	
Cc: Bishop-Crawford, Jennifer (OS/OASH)	
Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review	
Thanks for working on this. I'm grateful for Alan and Sayeedha's assistance with our website health	
content and I don't want to overwhelm them with all of the content we're going to receive in the next	
month.	
month.	
(b)(5)	
I I	



0)(5)
From: Bishop-Crawford, Jennifer (OS/OASH)
Sent: Friday, May 05, 2017 4:12 PM To Smith Advisors M (OS/OASH): Calling Sharp, Both (OS/OASH/OWH/DDI)
To: Smith, Adrienne M. (OS/OASH); Collins Sharp, Beth (OS/OASH/OWH/DPI) Cc: Leggin, Brooke (HHS/OWH)
Subject: FW: Fact Sheets &Content Areas for Alan &Sayeedha review
li Ladies,
Per the email below, can we discuss how DSC can work with your staff to review content for the
Nomenshealth.gov website between now and mid July? I'll come to each of you on Monday to discuss
ndividually or set up a time to chat.
enn
From: Leggin, Brooke (HHS/OWH)
Sent: Friday, May 05, 2017 4:00 PM
To: Bishop-Crawford, Jennifer (OS/OASH)
Subject: Fact Sheets &Content Areas for Alan &Sayeedha review
b)(5)





Brooke Leggin

Web and Community Manager



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: <u>brooke.leggin@hhs.gov</u> Work Hours: 7:30 am to 4:00 pm ET

Main: 202-690-7650 | Direct: M, Th, F 202-205-2373 T, W 301-864-2607

Websites: www.womenshealth.gov | www.girlshealth.gov OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov Connect with us on: Twitter | Facebook | YouTube

Sender: Collins Sharp, Beth (OS/OASH/OWH/DPI) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE



	GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=3162CD18B6FE4E3F894FD7FF80C0E17D-COLLINSSHAR>
Recipient:	Smith, Adrienne M. (OS/OASH) ; Bishop-Crawford, Jennifer (OS/OASH) ; Leggin, Brooke (HHS/OWH)
Sent Date:	2017/05/31 11:16:39
Delivered Date:	2017/05/31 11:16:40



From:	Wasserman, Jill (OS/OPHS)
To:	Bishop-Crawford, Jennifer (OS/OASH) ; Tytel, Jessica (OS/OASH)
CC:	Greene, Nicole (OS/OASH) ; Polacek, Aaron (OS/OASH)
Subject:	RE: Women's Caucus: National Women's Health Week
Date:	2017/03/02 16:09:36
Priority:	Normal
Туре:	Note

+Aaron as a FYI

OK.

We won't have a final version until we have the NWHW web pages up and running.

Jill

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Thursday, March 02, 2017 3:45 PM

To: Wasserman, Jill (OS/OPHS); Tytel, Jessica (OS/OASH)

Cc: Greene, Nicole (OS/OASH)

Subject: RE: Women's Caucus: National Women's Health Week

Hi there, Jill,

(b)(5)

Best, Jenn

From: Wasserman, Jill (OS/OPHS)

Sent: Tuesday, February 28, 2017 12:21 PM

To: Tytel, Jessica (OS/OASH)

Cc: Greene, Nicole (OS/OASH); Bishop-Crawford, Jennifer (OS/OASH) **Subject:** FW: Women's Caucus: National Women's Health Week

Hi Jessica -

Before you go on maternity leave, I wanted to check in with you on this.



(b)(5)		

Thank you,

Jill

From: Goldberg, Janet (HHS/ASL) **Sent:** Friday, May 06, 2016 5:18 PM

To: Singleton, Sara M. (HHS/ASL); Berge, Kathryn (HHS/ASL); Lee, Nancy C. (HHS/OASH); Wasserman,

Jill (OS/OPHS); Tytel, Jessica (OS/OASH); Polacek, Aaron (OS/OASH) **Subject:** FW: Women's Caucus: National Women's Health Week

FYI, the Women's Caucus leadership notified the full caucus.

From: McCarthy, Margaret [mailto:Margaret.McCarthy@mail.house.gov]

Sent: Friday, May 06, 2016 5:16 PM

To: Munasifi, Renee; Moran, Kelsey; Payne, Reagan

Cc: Goldberg, Janet (HHS/ASL)

Subject: Women's Caucus: National Women's Health Week

Dear Women's Caucus Staff,

We wanted to share the below and attached information from HHS about National Women's Health Week, which is next week.

Please contact Janet Goldberg at <u>Janet.Goldberg@hhs.gov</u> if you have any questions.

For the past 17 years, the U.S. Department of Health and Human Services Office on Women's Health has led National Women's Health Week (NWHW). The week serves as a time to help women understand what steps they can take to improve their health. Specifically, we encourage them to get active, eat healthy, pay attention to their mental health, visit a health care provider for a well-woman visit and preventive screenings, and avoid unhealthy behaviors, such as smoking and texting while driving. This year, we will celebrate NWHW from May 8–14, 2016.

We know health needs change as individuals age. Accordingly, we are focusing on women's health needs by decade to help them understand what steps to take for good health and well-being based on their age. For example, women in their 50's generally need to start getting colorectal cancer screenings – and some women should be screened earlier than age 50, if they have certain risk factors. When women know which preventive screenings they need, they can be proactive about their health. As part of NWHW, we educate women about the many preventive services they can receive without a copay, including an annual well-woman visit. Promoting regular care is essential to finding many diseases early, when they are easier to treat.



The Office on Women's Health depends on public officials like you to help us reach women. There are many ways you may join the celebration:

- Issue a proclamation recognizing NWHW.
- Write about NWHW on your website, blog or newsletter. You can also submit an op-ed to a local newspaper about the importance of women's health.
- Engage in NWHW social media activities. Remember to use **#NWHW** in any messages you share about the week.
- Take and promote the NWHW <u>pledge</u>.Direct women to our interactive pledge map, and challenge them to take steps for better health at any age.
- Share our NWHW infographics.
- Join the NWHW <u>Thunderclap</u> and encourage your constituents to do the same.
- Add the NWHW <u>Web banner to your website</u> to direct constituents to important health information and resources on the NWHW website.
- For the latest NWHW news, like the Office on Women's Health on Facebook (<u>facebook.com/HHSOWH</u>) and follow us on Twitter (<u>@womenshealth</u>) and Pinterest (<u>pinterest.com/womenshealth</u>). This will also make it easier to share our content.

We ask that you invite your constituents to support NWHW in any way they feel is appropriate for them. Attached is the NWHW Fact Sheet that you can use to support the celebration.

We hope you will join us in observing NWHW and encourage women to prioritize their health.

Sender:	Wasserman, Jill (OS/OPHS)
Recipient:	Bishop-Crawford, Jennifer (OS/OASH) ; Tytel, Jessica (OS/OASH) ; Greene, Nicole (OS/OASH) ; Polacek, Aaron (OS/OASH)
Sent Date:	2017/03/02 16:09:35
Delivered Date:	2017/03/02 16:09:36



From:	Bishop-Crawford, Jennifer (OS/OASH)
То:	Wasserman, Jill (OS/OPHS)
Subject:	RE: CSA language review
Date:	2018/02/16 16:06:00
Priority:	Normal
Туре:	Note

In any form

From: Wasserman, Jill (OS/OPHS)
Sent: Friday, February 16, 2018 4:06 PM
To: Bishop-Crawford, Jennifer (OS/OASH)
Subject: RE: CSA language review

Thanks.

(b)(5)			

From: Bishop-Crawford, Jennifer (OS/OASH)
Sent: Friday, February 16, 2018 3:54 PM

To: Wasserman, Jill (OS/OPHS) **Subject:** RE: CSA language review

Please see edited version attached. Please edit as needed and send forward. Jenn

From: Wasserman, Jill (OS/OPHS)
Sent: Friday, February 16, 2018 1:26 PM
To: Bishop-Crawford, Jennifer (OS/OASH)
Subject: FW: CSA language review

From: Smith, Adrienne M. (OS/OASH) **Sent:** Thursday, February 15, 2018 6:19 PM

To: Wasserman, Jill (OS/OPHS) **Subject:** FW: CSA language review

Jill,

I talked to Shavon and she reviewed this and added the CDC link below in bright red. She was walking out but also noted that if we have a fact sheet or something to reference (with link) that would be great



also. So we are good to go. Again, whatever the appropriate OWH reference is for this is fine. I do not need my name/pic as originally requested.

Thanks so much, Adrienne

From: Artis, Shavon (OS/OASH)

Sent: Thursday, February 15, 2018 5:43 PM

To: Smith, Adrienne M. (OS/OASH) **Subject:** RE: CSA language review

See CDC addition below.

From: Smith, Adrienne M. (OS/OASH) **Sent:** Thursday, February 15, 2018 5:28 PM

To: Artis, Shavon (OS/OASH) **Subject:** FW: CSA language review

From: Perrotte, Brittany (HHS/OASH) **Sent:** Thursday, February 15, 2018 4:25 PM

To: Smith, Adrienne M. (OS/OASH); Nelson, Keiva (OS/OASH)

Subject: RE: CSA language review

Hi Adrienne,

(b)(5)		
I hang this halps!		

I hope this helps!

Best,

Brittany

From: Smith, Adrienne M. (OS/OASH) **Sent:** Thursday, February 15, 2018 3:33 PM

To: Nelson, Keiva (OS/OASH); Perrotte, Brittany (HHS/OASH)

Subject: CSA language review

Brittany and Keiva (since Aaron is away),

I received a request yesterday to answer questions about sexual assault for the observance month edition of The Nation's Health (the APHA newspaper). Of course, this is something that Jenn needed to



preliminarily clear for Jill to assist with this. It's a short turnaround, they actually need this on Monday. We have to use govt.-authorized language from our website, so I pulled this together below (and from the cleared press release). I also changed the questions a bit (the original questions are at the bottom), but Jill said that we could. Please review and let me know if this is a good response, the order is appropriate or if we need to add other website information. Since we has to use website language, I changed to questions to match.

I need to get this to Jill by the morning. Thanks, Adrienne

(b)(5)	



Page 082 Withheld pursuant to exemption

(b)(5)

of the Freedom of Information and Privacy Act



(b)(5)		

Original Questions

Tell us about OWH's approach to sexual assault prevention.

What are some specific strategies or programs you employ to prevent sexual assault?

What are some effective practices for prevention that are working?

What is public health's role in sexual assault prevention?

What should every person know about sexual assault?

Adrienne M. Smith, PhD, MS, CHES

Director, Division of Policy and Performance Management



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Adrienne.Smith@hhs.gov

Main: 202-690-7650 | Direct: 202-690-5884 | Fax: 202-205-0626

Websites: www.womenshealth.gov | www.girlshealth.gov
OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov
Connect with us on: Twitter | Facebook | YouTube

Sender	Bishop-Crawford, Jennifer (OS/OASH)
Recipient	Wasserman, Jill (OS/OPHS)
Sent Date	2018/02/16 16:06:45
Delivered Date	2018/02/16 16:06:00



From:	Borden, Valerie (HHS/OASH)
То:	Bishop-Crawford, Jennifer (OS/OASH)
Subject:	RE: Blog submission for the Office on Women's Health
Date:	2017/04/14 11:06:45
Priority:	Normal
Туре:	Note

Yes, very helpful. Thanks.

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Friday, April 14, 2017 10:20 AM **To:** Borden, Valerie (HHS/OASH)

Subject: RE: Blog submission for the Office on Women's Health

Good morning, Val,

(b)(5)
Does this help?
Jenn
Jenn -
From: Borden, Valerie (HHS/OASH) Sent: Friday, April 14, 2017 8:00 AM To: Bishop-Crawford, Jennifer (OS/OASH) Subject: FW: Blog submission for the Office on Women's Health
Hi Jenn,
(b)(5)

Thanks. Val

From: admin@upliftgroup.com [mailto:admin@upliftgroup.com] On Behalf Of Gessie Thompson

Sent: Thursday, April 13, 2017 7:21 PM



To: Borden, Valerie (HHS/OASH)

Subject: Re: Blog submission for the Office on Women's Health

Hi Valerie,

I hope this finds you well. Yes. Prague is a beautiful city...one of my favorites!

Thank you for forwarding the revised article. Given the changes, I'd like to take a different approach to the article as you've advised--adding in what helped me personally. I will use the approach taken in the current "Becoming a PCOS Diva" article--meaning, speaking about it from a personal perspective verses a medical recommendation. A few questions:

- 1. If we remove the reference to the doctors, can I still include the content around the fact that research consistently links the growth of fibroids to estrogen and from there speak to how I reduced my estrogen levels by removing the toxins out of my lifestyles through stress management, diet and exercises?
- 2. I see that you removed the first two sentences of my opening quote. Can we keep it in if I simply remove the reference to the book and just use it as an opening quote? I am fine with keeping in the quote by removing the reference to the book
- 3. I see that you've deleted the free MP3 that I linked to the article. This is a free teleseminar that helps women learn more about the lifestyle changes they can make to help manage their fibroids. Is there a way to include this info in the article using different wording?
- 4. I see that the Becoming a PCOS Diva article had two links to her website. The first was in her byline and the other in her author bio. Will this be something I can also do? We do link to author's pages in their bios and I'm willing to do so for Gessie. But we don't highlight their products in the post that is the difference..

Thank you and by when do you need the revised document?

Your HOPE Sister, Gessie J. Thompson Co-Founder, Hope Beyond Fibroids Elimination Program Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach P: 718-591-2447 F: 646-478-9179

<u>info@gessiethompson.com</u> www.gessiethompson.com

Read How She Eliminated 50 FIBROIDS Without Surgery!

Download Our Free Hope Beyond Fibroids Elimination TeleSeminar MP3

On Thu, Apr 13, 2017 at 5:57 PM, Borden, Valerie (HHS/OASH) < <u>Valerie.Borden@hhs.gov</u>>wrote:
Hi Gessie,



I love Prague based on the week I spent there years ago! Hope you are getting good weather as it's a very walkable city.

I apologize for not getting back to you sooner with our edits. The attached has lots of edits but please don't be concerned. The two main things I had to remove were references to your book and the medical doctor who helped you as we are not allowed to promote products or medical professionals by name. In addition I removed the section on the 3 things every woman should know because we will link to our fact sheet on Fibroids: https://www.womenshealth.gov/a-z-topics/uterine-fibroids

We are excited to hear more of your personal story. You can add how diet and exercise helped you, etc., but we cannot include specific dietary recommendations.

Please feel free to email me back with any questions or concerns.

Best,

Valerie Borden

From: admin@upliftgroup.com [mailto:admin@upliftgroup.com] On Behalf Of Gessie Thompson

Sent: Tuesday, April 11, 2017 8:06 PM **To:** Borden, Valerie (HHS/OASH)

Subject: Blog submission for the Office on Women's Health

Hi Valerie,

I hope this finds you well. I'm writing to check back in with you on the status of the article. Your last email indicated that you were working on the edits and would be forwarding the final for my review.

The London Women's Health event well and I'm now in Prague on vacation for the week but will be checking email to ensure that I respond to you in a timely manner.

Your HOPE Sister,

Gessie J. Thompson

Co-Founder, Hope Beyond Fibroids Elimination Program

Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach

P: <u>718-591-2447</u>

F: <u>646-478-9179</u>

info@gessiethompson.com

www.gessiethompson.com

<u>Read How She Eliminated 50 FIBROIDS Without Surgery!</u>

Download Our Free Hope Beyond Fibroids Elimination TeleSeminar MP3



On Tue, Apr 4, 2017 at 9:44 PM, Gessie Thompson < <u>info@gessiethompson.com</u>>wrote: Hi Valerie,

Excellent. Thank you and I look forward to seeing them!

Your HOPE Sister, Gessie

On Tue, Apr 4, 2017 at 4:34 PM Borden, Valerie (HHS/OASH) <Valerie.Borden@hhs.gov>wrote:

Thanks Gessie,

I received your blog and we are putting it through review now. I'll share with you our edits once complete.

Enjoy your time in London!

Valerie Borden

From: <u>admin@upliftgroup.com</u> [mailto:<u>admin@upliftgroup.com</u>] On Behalf Of Gessie Thompson Sent: Friday, March 31, 2017 5:31 PM

To: Borden, Valerie (HHS/OASH)

Cc: Bishop-Crawford, Jennifer (OS/OASH); Wasserman, Jill (OS/OPHS) **Subject:** Re: Blog submission for the Office on Women's Health

Happy Friday Valerie,

I hope this finds you well. Attached is the promised draft of my piece in support of "National Fibroids Awareness" and "National Infertility Awareness" weeks (observed April 22 to 29th).

I have also linked below two photo options for your use:

- Head Shot: https://app.box.com/s/z41oqn4z1viq4y44zsddbi3ioefuvcef
- Family Photo: https://app.box.com/s/ibkoamn98s21gs5ajwsc2oxn5az1bw49

Thank you and I look forward to hearing your thoughts/receiving your feedback.

Your HOPE Sister,

Gessie J. Thompson Co-Founder, Hope Beyond Fibroids Elimination Program Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach



P: <u>718-591-2447</u> F: <u>646-478-9179</u>

info@gessiethompson.com www.gessiethompson.com

Read How She Eliminated 50 FIBROIDS Without Surgery!

<u>Download Our Free Hope Beyond Fibroids Elimination TeleSeminar MP3</u>

On Thu, Mar 16, 2017 at 2:43 PM, Borden, Valerie (HHS/OASH) < <u>Valerie.Borden@hhs.gov</u>>wrote:
Hi Gessie,

I'm so pleased that you are willing to write a piece for our blog and can meet our April timetable. I look forward to receiving your draft the first week in April.

Thanks again!

Valerie Borden

From: Gessie Thompson [mailto:<u>info@gessiethompson.com</u>]

Sent: Thursday, March 16, 2017 2:14 PM

To: Borden, Valerie (HHS/OASH)

Cc: Bishop-Crawford, Jennifer (OS/OASH); Wasserman, Jill (OS/OPHS) **Subject:** Re: Blog submission for the Office on Women's Health

Dear Valerie,

It's a pleasure to e-meet you and thank you for your email. It would be my honor to share my story through your blog in support of "National Infertility Awareness Week" and "National Fibroids Awareness Week"--which both occur April 23 to 29th.

I will review the guidelines you've provided and submit the piece by the first week of April. I travel on April 6th to speak at a women's health conference in the London area on April 8th so it will ideally be before then.

I look forward to working with you.

Your HOPE Sister, Gessie J. Thompson

Co-Founder, Hope Beyond Fibroids Elimination Program

Women's Health Speaker, Bestselling Author & Fibroids & Fertility Coach

P: <u>718-591-2447</u> F: <u>646-478-9179</u>



info@gessiethompson.com www.gessiethompson.com

Read How She Eliminated 50 FIBROIDS Without Surgery!

Download Our Free Hope Beyond Fibroids Elimination TeleSeminar MP3

On Wed, Mar 15, 2017 at 9:24 AM, Borden, Valerie (HHS/OASH) < <u>Valerie.Borden@hhs.gov</u>>wrote: Dear Gessie,

I work in the HHS Office on Women's Health and manage our blog. Jenn Bishop Crawford and Jill Wasserman shared with me your interest in providing a blog for our site for April for National Infertility Month, April 23-29. Are you able to provide me with a 500-700 word draft by early April? I need about 2 weeks for editorial review and clearance on this end. Attached are our blog guidelines that provide specific guidance. Also, feel free to view our past blog posts at: https://www.womenshealth.gov/blog

Please contact me with any questions. We are very excited to share your story with our blog followers!

Best,

Valerie Borden

Senior Advisor, Public and Private Partnerships Division of Strategic Communications

Office on Women's Health U.S. Department of Health and Human Services 200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

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--

See-Soar-Succeed□, Gessie Thompson



President/CEO The UpLift! Group

P: 718-591-2447 M: 917-535-0809 F: 646-478-9179

gessie@upliftgroup.com www.upliftgroup.com

Sender:	Borden, Valerie (HHS/OASH)
Recipient:	Bishop-Crawford, Jennifer (OS/OASH)
Sent Date:	2017/04/14 11:06:45



From:	Ann Abercrombie < (b)(6)	@me.com>	
To:	Kimberly Varner < (b)(6)	@hagersharp.com>	
CC:	Darcy Sawatzki (b)(6) @hagersharp.com>; Abercrombie, Ann (HHS/OASH) ; Bishop-Crawford, Jennifer (OS/OASH) ; Phenix, Adrianne (HHS/OASH)		
Subject:	Re: Temporary NWGHAAD Site		
Date:	2017/02/28 12:04:46		
Priority:	: Normal		
Туре:	Note		

I approve of this plan

Sent from my iPhone

On Feb 28, 2017, at 11:57 AM, Kimberly Varner < (b)(6) @hagersharp.com > wrote:

Temporary NWGHAAD Site

Ann – Please see our initial thoughts on how best to update the website and make it live again, while the XOXO is being revised. Palladian can have the site up relatively quickly, as soon as they receive approval on the proposed modifications.

To aid the approval process, they can make the proposed edits available to preview on their test server.

Recommended edits to pages/materials that had the XOXO image are as follows:

- Landing page Remove the XOXO we don't need the NWGHAAD logo because it is at the top of the page
- About Us Remove the XOXO we don't need the NWGHAAD logo because it is at the top of the page
- Social Media Tools Hide until documents are updated with new XOXO.
- Resources: Fact Sheets and Posters Edit the "Resources" page to just have links to the (HTML-only) fact sheet and the "Ideas for Supporting NWGHAAD" pages. Everything else should flow fine with the XOXO graphic removed.
- Blog posts HS is revising now to ensure links do not go to social media tools. Should not be impacted.



We look forward to your review and approval of this temporary plan. A more in-depth plan and status of actions taken to date, is forthcoming.

Kim

KIM VARNER, MA

Senior Account Supervisor

1030 15TH STREET NW, SUITE 600E WASHINGTON, DC 20005 WWW.HAGERSHARP.COM
D 202.706.7404

<image001.png>

Sender:	Ann Abercrombie (b)(6) @me.com>	
кесіріенс	Darcy Sawatzki < (b)(6)	
Sent Date:	Sent Date: 2017/02/28 12:03:33	
Delivered Date:	2017/02/28 12:04:46	



From:	Bishop-Crawford, Jennifer (OS/OASH)
То:	Wasserman, Jill (OS/OPHS)
Subject:	RE: National Women's Health Week, May 14-20, 2017!
Date:	2017/04/26 16:24:00
Priority: Normal Type: Note	

No problem.

From: Wasserman, Jill (OS/OPHS) Sent: Wednesday, April 26, 2017 4:19 PM **To:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: FW: National Women's Health Week, May 14-20, 2017!

FYI only.

I usually don't clog your inbox with these, but want you to know that these requests come directly to me from varied sources ;);)

From: Hoersch, Michelle (HHS/OASH) Sent: Wednesday, April 26, 2017 1:21 PM

To: Wasserman, Jill (OS/OPHS) **Cc:** Thompson, Cheryl (OS/OASH)

Subject: RE: National Women's Health Week, May 14-20, 2017!

Thanks Jill!

Michelle Hoersch, MS Regional Women's Health Coordinator **Public Health Advisor**

Office of the Regional Health Administrator - Region V U.S. Department of Health and Human Services 233 N. Michigan Ave. Chicago, IL 60601

E-mail: Michelle.Hoersch@hhs.gov

Direct: 312-353-8122

Learn about all your health insurance options under the Affordable Care Act by visiting www.healthcare.gov

From: Wasserman, Jill (OS/OPHS)

Sent: Wednesday, April 26, 2017 11:32 AM

To: Hoersch, Michelle (HHS/OASH) **Cc:** Thompson, Cheryl (OS/OASH)

Subject: RE: National Women's Health Week, May 14-20, 2017!



(b)(5)

Best of luck,

Jill

*I attached the toolkit, just in case you want to use it or share with your networks.

From: Hoersch, Michelle (HHS/OASH) **Sent:** Wednesday, April 19, 2017 3:05 PM

To: Wasserman, Jill (OS/OPHS)

Cc: Thompson, Cheryl (OS/OASH); Hoersch, Michelle (HHS/OASH) **Subject:** RE: National Women's Health Week, May 14-20, 2017!

Hi Jill,

Congratulations on launching another NWHW!

I am digging out of email after having been out last week on a much needed vacation. One of the messages I had when I got back was a request for printed or printable materials. I just took a quick glance at the website, and poked around a little, but I couldn't tell whether or where the printable items can be found.

Thanks, Signed Clueless ©

Michelle Hoersch, MS
Regional Women's Health Coordinator
Public Health Advisor

Office of the Regional Health Administrator – Region V U.S. Department of Health and Human Services 233 N. Michigan Ave. Chicago, IL 60601



E-mail: Michelle.Hoersch@hhs.gov

Direct: 312-353-8122

Learn about all your health insurance options under the Affordable Care Act by visiting www.healthcare.gov

From: Wasserman, Jill (OS/OPHS) Sent: Monday, April 10, 2017 9:08 AM

To: OS OWH CCWH; OS - OPHS OWH Regions; Abercrombie, Ann (HHS/OASH); Alexander, Stephanie (OS/OASH); Artis, Shavon (OS/OASH); Berryman-Gordon, Melanie (HHS/OASH); Bishop-Crawford, Jennifer (OS/OASH); Borden, Valerie (HHS/OASH); Cha, Jooyoung (HHS/OASH); Collins Sharp, Beth (OS/OASH/OWH/DPI); Disckind, Barbara (HHS/OASH); Evans, Syreeta (OS/OASH); Greene, Nicole (OS/OASH); Hayes, Stephen (OS/OASH); Haynes, Suzanne G (HHS/OASH); Leggin, Brooke (HHS/OWH); Marshall, Candace (OS/OASH); Nelson, Keiva (OS/OASH); Nixon, Emmett (HHS/OASH); Perrotte, Brittany (HHS/OASH); Phenix, Adrianne (HHS/OASH); Polacek, Aaron (OS/OASH); Scott, Karen (HHS/OASH); Seinos, Gustavo (OS/OASH); Simon, Alan (OS/OASH); Singleton, Ursuline (HHS/OASH); Smith, Adrienne M. (OS/OASH); Thompson, Cheryl (OS/OASH); Tytel, Jessica (OS/OASH); Uddin, Sayeedha (OS/OASH); Wasserman, Jill (OS/OPHS); Williams, Shalethia (OS/OASH); Woods, Caira (HHS/OASH)

Subject: National Women's Health Week, May 14-20, 2017!

Dear Colleagues,

The National Women's Health Week (NWHW) website is live.

Need help promoting and supporting the week? No problem! Check out the attached NWHW toolkit and distribute to your networks.

A few notes:

- Join the National Women's Health Week <u>Thunderclap</u> and encourage your followers to do the same.
- Take and share the NWHW "What's your health style?" quiz.
- Use #NWHW for all your related social media leading up to and during the week.

Thank you for supporting NWHW and let me know if you have any questions.

Best,

Jill Lauren Wasserman, MPH

Health Education Specialist



OWH_logo_150

Office on Women's Health
U.S. Department of Health and Human Services
200 Independence Avenue, SW, Washington, DC 20201



E-mail: Jill.Wasserman1@hhs.gov

Main: 202.690.7650

Sender:	Bishop-Crawford, Jennifer (OS/OASH)
Recipient:	Wasserman, Jill (OS/OPHS)
Sent Date:	2017/04/26 16:24:15
Delivered Date:	2017/04/26 16:24:00



From:	From: HHS News (HHS/ASPA) < HHS.News@HHS.GOV>	
SentVia: For OS announcements to all of HHS <hhs-news-all@list.nih.g< th=""></hhs-news-all@list.nih.g<>		
To:	<hhs-news-all@list.nih.gov></hhs-news-all@list.nih.gov>	
Subject: OPEN SEASON - FEDERAL BENEFITS FAST FACTS		
Date:	2017/11/14 11:29:41	
Priority: Normal		
Туре:	Note	



2017 Federal Benefits Open Season Nov 13 - Dec 11, 2017

OPEN SEASON STARTS TODAY!!!!

Federal Benefits FastFacts

What to Consider During the Federal Benefits Open Season November 13 – December 11, 2017

Open Season is the time of year when you have the opportunity to make decisions about your benefits under the Federal Flexible Spending Account Program (FSAFEDS), the Federal Employees Dental and Vision Insurance Program (FEDVIP), and the Federal Employees Health Benefits (FEHB) Program.

If you already have an FSAFEDS account, it will not continue automatically: you must reenroll for 2018.

If you take no action, your current enrollment in FEDVIP and/or FEHB will continue automatically for 2018. You will be subject to any changes in premiums, benefits, and service areas.

We strongly recommend you evaluate your current enrollment status in the Programs. We have listed three basic questions to ask yourself. All are equally important and should be considered carefully.



1. What are my and/or my family's expected health care needs for 2018?

<u>Federal Flexible Spending Account Program (FSAFEDS)</u>

What are my out-of-pocket expenses going to be (e.g., deductibles, copays, coinsurances, day care and elder care expenses, over-the-counter drugs and medicines [prescription required except for insulin] and other over-the-counter products)? Does my child need braces or use acne treatments? Will I send my children (under age 13) to a non-overnight summer camp next year?

Federal Employees Dental and Vision Insurance Program (FEDVIP)

Do I only need routine dental care? Will I need a crown or a root canal? Does my child need braces?

Do I need glasses and/or contact lenses? Am I considering Lasik surgery?

Federal Employees Health Benefits (FEHB) Program

Am I expecting a new baby? Do I need surgery? Will my medication needs change?

2. What benefits are available in 2018?

Now that you have an idea of what services you may need, the next step is to determine what benefits the plans provide in 2018. If you are already enrolled, please review the "How We Have Changed for 2018" section of your 2018 FEDVIP brochure and Section 2 "Changes for 2018" of your 2018 FEHB plan brochure for any benefit changes.

FSAFEDS

• Should I enroll in a health care account and/or a dependent care account? How much should I contribute to my FSAFEDS account(s)?

FEDVIP and FEHB

- Are there plan limitations (i.e., number of visits or dollar maximums) which will result in out-of- pocket expenses?
- Are any services I may need (such as chiropractic care or Lasik surgery) not covered?
- What is my share of the cost of prescription drugs? (FEHB only)
- What deductibles, copays, and coinsurances must I pay?
- Do I have enough coverage for extensive dental work?
- Do I have enough coverage for glasses, exams, contact lenses, or other vision services?

3. How much will it cost?



Now that you have an idea of what services you may need and what types of benefits are provided by FSAFEDS, FEDVIP, and/or FEHB plans, the third consideration is cost.

Enrolling in FSAFEDS is free to you. You just have to decide how much (from a minimum of \$100 to a maximum of \$2,600 per participant for a health care account and/or \$5,000 per household for a dependent care account) to contribute from your salary, which you'll get back when you incur eligible expenses.

Look at the 2018 premiums for the FEDVIP and/or FEHB plan you are already enrolled in or considering enrolling in. You can find the premiums in the 2017 FEDVIP and FEHB brochures and on our website at http://www.opm.gov/insure.

4. What do I do now?

Now that you have considered these questions, you are on your way to making more informed decisions about your benefit choices for 2018. If you want to participate in FSAFEDS for 2018, you **must** make a new election. If you are satisfied with your FEDVIP plan and/or FEHB plan, you do not have to do anything. Your FEDVIP and/or FEHB enrollment(s) will continue for 2018. If you are not satisfied with your current enrollment status, please visit our website and your human resources office and look at the following resources to assist you in making decisions.

- FSAFEDS brochures at http://www.FSAFEDS.com
- FEDVIP brochures at http://www.opm.gov/healthcare-insurance/dental-vision/plan-information
- FEHB brochures at http://www.opm.gov/FEHBbrochures
- OPM's plan comparison tool at http://www.opm.gov/fehbcompare
- Checkbook another plan comparison tool at http://www.checkbook.org/newhig2/hhs.cfm

5. How Employees Enroll or Change Enrollment?

- FEHB myPay electronic enrollment system or in rare cases SF 2809. Consult with your servicing HR Office when a SF 2809 would be used.
- FEDVIP www.BENEFEDS.com or 1-877-888-3337 (TTY 1-877-889-5680)
- FSAFEDS www.FSAFEDS.com or 1-877-372-3337 (TTY 1-800-952-0450)

Do not rely solely on this fact sheet. Always refer to the individual plan brochures before making your final decision.

*Please note you are receiving this email because you are using an email account supported by the Department of Health and Human Services. HHS News cannot remove you from this email list. Please do not respond to this



email. If you have questions or comments regarding the content above, please contact the sponsoring organization listed. If you would like to submit a message for HHS News dispersal, please email HHS.News@hhs.gov. Thank you.

Sender: HHS News (HHS/ASPA) <hhs.news@hhs.gov>; For OS announcements to all of HHS <hhs-i< th=""></hhs-i<></hhs.news@hhs.gov>	
Recipient:	<hhs-news-all@list.nih.gov></hhs-news-all@list.nih.gov>
Sent Date: 2017/11/14 11:18:44 Delivered Date: 2017/11/14 11:29:41	



From:	Leggin, Brooke (HHS/OWH)
То:	Bishop-Crawford, Jennifer (OS/OASH)
Subject: FW: Connecting again in Washington DC	
Date:	2017/05/15 09:35:34
Priority: Normal Type: Note	

(b)(5)		

From: Ceinos, Gustavo (OS/OASH)
Sent: Friday, May 12, 2017 3:12 PM
To: Leggin, Brooke (HHS/OWH)

Subject: FW: Connecting again in Washington DC

(b)(5)

From: Emily Taylor [mailto:ETaylor@solvecfs.org]
Sent: Thursday, April 27, 2017 11:55 PM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Ceinos, Gustavo (OS/OASH)

Cc: Carol Head

Subject: Connecting again in Washington DC

Dear Beth and Gustavo -

I hope this message finds you both doing well! My sincerest apologies that I was unable to join your meeting in March with Carol. However, I hear that it was a wonderful conversation. I wanted to reach out to you on two items.

First, as requested, attached is a quick review of the content of the Chronic Fatigue Syndrome page on Womenshealth.gov and the accompanying fact sheet.

I hope this information is helpful. How was the response to the FAQ? We unfortunately did not have the capacity to do a full-court press to get the request out into the community and relied on other channels to spread the word. I hope you received a strong response, but I imagine it was not overwhelming.

Secondly, Carol and I will be traveling to DC again for "ME/CFS Advocacy Week" and we would love to meet with you and we would love to continue the conversation with you about moving CFSAC and our



work forward. We have availability the afternoon of Tuesday May 16th. Please let me know if you would like to connect, but we understand if the limited time frame makes it difficult.

We can schedule a phone call at a later date if the timing does not work out. As always, we are excited for the opportunity to work with you both and assist in making progress within the agencies for ME/CFS, even in these uncertain times.

All the best,



Emily Taylor

Director of Advocacy and Public Relations

Solve ME/CFS Initiative

p: 704-364-0016 ext. 209

w: www.SolveCFS.org

Donate to Solve ME/CFS Initiative

Working to make ME/CFS widely understood, diagnosable, and treatable

Sender:	Leggin, Brooke (HHS/OWH)
Recipient:	Bishop-Crawford, Jennifer (OS/OASH)
Sent Date:	2017/05/15 09:35:33
Delivered Date:	2017/05/15 09:35:34



From:	Marshall, Candace (OS/OASH)
То:	Bishop-Crawford, Jennifer (OS/OASH)
Subject:	RE: Clearance of OWH videos on PCOS and Breastfeeding
Date:	2018/02/06 14:20:52
Priority:	Normal
Туре:	Note

Thanks!

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Tuesday, February 06, 2018 2:02 PM

To: Marshall, Candace (OS/OASH)

Subject: RE: Clearance of OWH videos on PCOS and Breastfeeding

No, please send forward.

From: Marshall, Candace (OS/OASH) **Sent:** Monday, February 05, 2018 1:45 PM **To:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: Clearance of OWH videos on PCOS and Breastfeeding

Hi Jenn,

Hi Nicole,

Do you think any other information needs to be included or removed in the email to Nicole?

Thanks,
Candace

(b)(5))		



(b)(5)		

Thanks, Candace

Candace Marshall, MPH Health Communications Specialist



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

Email: Candace.Marshall@hhs.gov

Main: 202-690-7650 | Direct: 202-690-5414

Sender:	Marshall, Candace (OS/OASH)
Recipient:	Bishop-Crawford, Jennifer (OS/OASH)
Sent Date:	2018/02/06 14:20:50



Delivered Date: 2018/02/06 14:20:52



From:	Marshall, Candace (OS/OASH)
То:	Bishop-Crawford, Jennifer (OS/OASH)
Subject:	RE: Clearance of OWH videos on PCOS and Breastfeeding
Date:	2018/02/27 16:09:02
Priority:	Normal
Туре:	Note

Okay, thanks. I'll check in with her on Thursday.

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Tuesday, February 27, 2018 4:03 PM

To: Marshall, Candace (OS/OASH)

Subject: RE: Clearance of OWH videos on PCOS and Breastfeeding

That's fine. She is in training until Wednesday

From: Marshall, Candace (OS/OASH) **Sent:** Tuesday, February 27, 2018 2:39 PM **To:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: FW: Clearance of OWH videos on PCOS and Breastfeeding

Hi Jenn,

(b)(5)

From: Greene, Nicole (OS/OASH)

Sent: Tuesday, February 13, 2018 9:43 AM

To: Marshall, Candace (OS/OASH) **Cc:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Clearance of OWH videos on PCOS and Breastfeeding

Yes. Glad you reminded me! they slipped off my radar! I will put them on my calendar!!

Nicole Greene

Acting Director Deputy Director



OWH_logo_150

Office on Women's Health
Office of the Assistant Secretary for Health
Office of the Secretary



U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Nicole.Greene@hhs.gov

Main: 202-690-7650 | Direct: 202-205-2614

Websites: www.girlshealth.gov | www.girlshealth.gov | <a href="www.girlsh

From: Marshall, Candace (OS/OASH)
Sent: Tuesday, February 13, 2018 9:13 AM

To: Greene, Nicole (OS/OASH)

Cc: Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Clearance of OWH videos on PCOS and Breastfeeding

Hi Nicole,

(b)(5)

Candace Marshall, MPH Health Communications Specialist/ Social Media Lead



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Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

Email: Candace.Marshall@hhs.gov

Main: 202-690-7650 | Direct: 202-690-5414

Websites: www.girlshealth.gov | www.girlshealth.gov | <a href="www.girlsh

From: Greene, Nicole (OS/OASH)

Sent: Tuesday, February 06, 2018 3:00 PM

To: Marshall, Candace (OS/OASH)

Cc: Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Clearance of OWH videos on PCOS and Breastfeeding

Hi Candace,

When do you need this by?

Nicole Greene

Acting Director



Deputy Director



OWH_logo_150

Office on Women's Health
Office of the Assistant Secretary for Health
Office of the Secretary

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Nicole.Greene@hhs.gov

Main: 202-690-7650 | Direct: 202-205-2614

From: Marshall, Candace (OS/OASH) **Sent:** Tuesday, February 06, 2018 2:54 PM

To: Greene, Nicole (OS/OASH)

Cc: Bishop-Crawford, Jennifer (OS/OASH)

Subject: Clearance of OWH videos on PCOS and Breastfeeding

Hi Nicole,

(b)(5)



(b)(5)	

Thanks, Candace

Candace Marshall, MPH Health Communications Specialist



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

Email: Candace.Marshall@hhs.gov

Main: 202-690-7650 | Direct: 202-690-5414

Sender:	Marshall, Candace (OS/OASH)
Recipient:	Bishop-Crawford, Jennifer (OS/OASH)
Sent Date:	2018/02/27 16:09:00
Delivered Date:	2018/02/27 16:09:02



From:	Leggin, Brooke (HHS/OWH)
To:	Bishop-Crawford, Jennifer (OS/OASH) ; Abercrombie, Ann (HHS/OASH) ; Borden, Valerie (HHS/OASH) ; Wasserman, Jill (OS/OPHS) ; Marshall, Candace (OS/OASH) ; Thompson, Cheryl (OS/OASH) ; Phenix, Adrianne (HHS/OASH) <o=exchangelabs (fydibohf23spdlt)="" administrative="" c="" cn="Recipients/cn=d177127087f34cc1834ed6e8eb9836dd-Thompson," group="" ou="Exchange">; Phenix, Adrianne (HHS/OASH) <o=exchangelabs (fydibohf23spdlt)="" administrative="" adr="" cn="Recipients/cn=ac73a58ee24044bc98c4dd74e24d8740-Phenix," group="" ou="Exchange"></o=exchangelabs></o=exchangelabs>
Subject:	womenshealth.gov in Mobile is arriving!
Date:	2017/01/13 09:58:02
Priority:	Normal
Туре:	Note

I'm pleased to let you know that we have several fact sheets newly in mobile-design. Some of this content has not been updated recently, but these are our most popular fact sheets so we felt it was important to get them into mobile-design ASAP.

The mobile-friendly template still has some kinks to be worked out. The transition to a fully mobile website continues over the next six months. Please let me know if you have any questions or concerns. Thanks.

Brooke

All of our mobile-friendly content:

CONTENT AREAS

https://www.womenshealth.gov/ [Homepage only]

https://www.womenshealth.gov/about-us/

https://www.womenshealth.gov/hiv-and-aids

https://www.womenshealth.gov/nwghaad/

https://www.womenshealth.gov/nwhw/

FACTSHEETS

https://www.womenshealth.gov/publications/our-publications/fact-sheet/polycystic-ovary-

syndrome.html

https://www.womenshealth.gov/a-z-topics/acne

https://www.womenshealth.gov/a-z-topics/caregiver-stress

https://www.womenshealth.gov/a-z-topics/endometriosis

https://www.womenshealth.gov/a-z-topics/human-papillomavirus

https://www.womenshealth.gov/a-z-topics/mammograms

https://www.womenshealth.gov/a-z-topics/menstruation-and-menstrual-cycle



https://www.womenshealth.gov/a-z-topics/pregnancy-tests

https://www.womenshealth.gov/a-z-topics/premenstrual-syndrome

https://www.womenshealth.gov/a-z-topics/syphilis

https://www.womenshealth.gov/a-z-topics/thyroid-disease

https://www.womenshealth.gov/a-z-topics/urinary-tract-infections

https://www.womenshealth.gov/a-z-topics/uterine-fibroids

https://www.womenshealth.gov/a-z-topics/varicose-veins-and-spider-veins

https://www.womenshealth.gov/a-z-topics/birth-control-methods

https://www.womenshealth.gov/a-z-topics/emergency-contraception

Brooke Leggin

Web and Community Manager



OWH_logo_150

Office on Women's Health
U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: brooke.leggin@hhs.gov Work Hours: 7:30 am to 4:00 pm ET

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Websites: www.womenshealth.gov | www.girlshealth.gov OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov Connect with us on: Twitter | Facebook | YouTube

Sender:	Leggin, Brooke (HHS/OWH)
Recipient:	Bishop-Crawford, Jennifer (OS/OASH) ; Abercrombie, Ann (HHS/OASH) ; Borden, Valerie (HHS/OASH) ; Wasserman, Jill (OS/OPHS) ; Marshall, Candace (OS/OASH) ; Thompson, Cheryl (OS/OASH) ; Phenix, Adrianne (HHS/OASH) ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ac73a58ee24044bc98c4dd74e24d8740-Phenix, Adr>
Sent Date:	2017/01/13 09:58:01
Delivered Date:	2017/01/13 09:58:02



From:	Phenix, Adrianne (HHS/OASH)
То:	Kimberly Varner < (b)(6)
CC:	Darcy Sawatzki <(b)(6) @hagersharp.com>; Abercrombie, Ann (HHS/OASH)
Subject:	RE: Temporary NWGHAAD Site
Date:	2017/02/28 13:31:01
Priority:	Normal
Туре:	Note

Thanks Kim,

The site is approved. Thanks to you and the team for your flexibility and quick turnaround on this.

- Options are to either remove the sentences in question or rewrite the copy. What is your preference?
 - o I looked here. It's fine to just remove those sentences.

Thanks!

AP

From: Kimberly Varner [mailto:(b)(6) @hagersharp.com]

Sent: Tuesday, February 28, 2017 12:30 PM

To: Bishop-Crawford, Jennifer (OS/OASH); Ann Abercrombie

Cc: Darcy Sawatzki; Abercrombie, Ann (HHS/OASH); Phenix, Adrianne (HHS/OASH)

Subject: RE: Temporary NWGHAAD Site

Afternoon -

Please see the preview link here: http://womenshealthgovstg.prod.acquia-sites.com/nwghaad

We've reviewed each page and don't see any use of the logo.

There are some references in the "Ideas for observing NWGHAAD" page to the pages that are now removed. Options are to either remove the sentences in question or rewrite the copy. What is your preference?

The site can go live within an hour of approval.

KIM VARNER, MA

Senior Account Supervisor



1030 15TH STREET NW, SUITE 600E WASHINGTON, DC 20005 WWW.HAGERSHARP.COM D 202.706.7404

_

cid:C4E50C46-9AC0-4C7D-8E5C-D2B678C9FB60

From: Bishop-Crawford, Jennifer (OS/OASH) [mailto:Jennifer.Bishop-Crawford@hhs.gov]

Sent: Tuesday, February 28, 2017 12:21 PM

To: Kimberly Varner < KVarner@hagersharp.com>; Ann Abercrombie < antastic@me.com>

Cc: Darcy Sawatzki <dsawatzki@hagersharp.com>; Abercrombie, Ann (HHS/OASH)

<ann.Abercrombie@hhs.gov>; Phenix, Adrianne (HHS/OASH) Adrianne.Phenix@hhs.gov>

Subject: RE: Temporary NWGHAAD Site

Please provide an update on how soon the site will be back up. Thanks.

From: Kimberly Varner [mailto:KVarner@hagersharp.com]

Sent: Tuesday, February 28, 2017 12:05 PM

To: Ann Abercrombie

Cc: Darcy Sawatzki; Abercrombie, Ann (HHS/OASH); Bishop-Crawford, Jennifer (OS/OASH); Phenix,

Adrianne (HHS/OASH)

Subject: RE: Temporary NWGHAAD Site

Thanks. Moving forward.

KIM VARNER, MA

Senior Account Supervisor

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WWW.HAGERSHARP.COM

D 202.706.7404



cid:C4E50C46-9AC0-4C7D-8E5C-D2B678C9FB60

From: Ann Abercrombie [mailto:antastic@me.com]

Sent: Tuesday, February 28, 2017 12:04 PM

To: Kimberly Varner < KVarner@hagersharp.com>

Cc: Darcy Sawatzki <<u>dsawatzki@hagersharp.com</u>>; Abercrombie, Ann (HHS/OASH) <<u>Ann.Abercrombie@hhs.gov</u>>; Bishop-Crawford, Jennifer (OS/OASH) <<u>Jennifer.Bishop-Crawford@hhs.gov</u>>; Phenix, Adrianne (HHS/OASH) <<u>Adrianne.Phenix@hhs.gov</u>>

Subject: Re: Temporary NWGHAAD Site

I approve of this plan

Sent from my iPhone

On Feb 28, 2017, at 11:57 AM, Kimberly Varner < KVarner@hagersharp.com>wrote:



(b)(5)	

Kim

KIM VARNER, MA

Senior Account Supervisor

1030 15TH STREET NW, SUITE 600E WASHINGTON, DC 20005 WWW.HAGERSHARP.COM D 202.706.7404

<image001.png>

Sender	Phenix, Adrianne (HHS/OASH)
Recipient	Kimberly Varner <kvarner@hagersharp.com>; Bishop-Crawford, Jennifer (OS/OASH) ; Ann Abercrombie <antastic@me.com>; Darcy Sawatzki <dsawatzki@hagersharp.com>; Abercrombie, Ann (HHS/OASH) </dsawatzki@hagersharp.com></antastic@me.com></kvarner@hagersharp.com>



Sent Date: 2017/02/28 13:31:00

Delivered Date: 2017/02/28 13:31:01



From:	Phenix, Adrianne (HHS/OASH)
То:	Bishop-Crawford, Jennifer (OS/OASH)
Subject:	RE: Temporary NWGHAAD Site
Date:	2017/02/28 13:24:54
Priority:	Normal
Туре:	Note

On it!

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Tuesday, February 28, 2017 1:23 PM

To: Phenix, Adrianne (HHS/OASH) **Subject:** RE: Temporary NWGHAAD Site

We can move forward with making it live.

Jenn

From: Phenix, Adrianne (HHS/OASH)
Sent: Tuesday, February 28, 2017 1:15 PM
To: Bishop-Crawford, Jennifer (OS/OASH)
Subject: RE: Temporary NWGHAAD Site

Importance: High

Jenn,

The site looks good and the logo has been completely removed. Palladian said they can get it back live within an hour of approval.

Do you have any concerns with the test site or can we go ahead and launch this version?

THANKS!

AΡ

Sent: Tuesday, February 28, 2017 12:30 PM

To: Bishop-Crawford, Jennifer (OS/OASH); Ann Abercrombie

Cc: Darcy Sawatzki; Abercrombie, Ann (HHS/OASH); Phenix, Adrianne (HHS/OASH)

Subject: RE: Temporary NWGHAAD Site

Afternoon -

Please see the preview link here: http://womenshealthgovstg.prod.acquia-sites.com/nwghaad

We've reviewed each page and don't see any use of the logo.



There are some references in the "Ideas for observing NWGHAAD" page to the pages that are now removed. Options are to either remove the sentences in question or rewrite the copy. What is your preference?

The site can go live within an hour of approval.

KIM VARNER, MA

Senior Account Supervisor

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cid:C4E50C46-9AC0-4C7D-8E5C-D2B678C9FB60

From: Bishop-Crawford, Jennifer (OS/OASH) [mailto:Jennifer.Bishop-Crawford@hhs.gov
--

Sent: Tuesday, February 28, 2017 12:21 PM

To: Kimberly Varner (b)(6) @hagersharp.com; Ann Abercrombie antastic@me.com>

Cc: Darcy Sawatzki < (b)(6) <u>@hagersharp.com</u>>; Abercrombie, Ann (HHS/OASH)

<<u>Ann.Abercrombie@hhs.gov</u>>; Phenix, Adrianne (HHS/OASH) <<u>Adrianne.Phenix@hhs.gov</u>>

Subject: RE: Temporary NWGHAAD Site

Please provide an update on how soon the site will be back up.

Thanks.

From: Kimberly Varner [mailto: (b)(6) @hagersharp.com]

Sent: Tuesday, February 28, 2017 12:05 PM

To: Ann Abercrombie

Cc: Darcy Sawatzki; Abercrombie, Ann (HHS/OASH); Bishop-Crawford, Jennifer (OS/OASH); Phenix,

Adrianne (HHS/OASH)

Subject: RE: Temporary NWGHAAD Site

Thanks. Moving forward.

KIM VARNER, MA

Senior Account Supervisor

1030 15TH STREET NW, SUITE 600E WASHINGTON, DC 20005 WWW.HAGERSHARP.COM D 202.706.7404



cid:C4E50C46-9AC0-4C7D-8E5C-D2B678C9FB60

From: Ann Abercrombie [mailto:antastic@me.com]

Sent: Tuesday, February 28, 2017 12:04 PM

To: Kimberly Varner ⟨b)(6) @hagersharp.com⟩



<ann.Abercrombie@hhs.gov>; Bishop-Crawford, Jennifer (OS/OASH) < Jennifer.Bishop-<u>Crawford@hhs.gov</u>>; Phenix, Adrianne (HHS/OASH) < <u>Adrianne.Phenix@hhs.gov</u>> Subject: Re: Temporary NWGHAAD Site I approve of this plan Sent from my iPhone On Feb 28, 2017, at 11:57 AM, Kimberly Varner < (b)(5) <u>@hagersharp.com</u>>wrote:

Kim

KIM VARNER, MA

Senior Account Supervisor

1030 15TH STREET NW, SUITE 600E WASHINGTON, DC 20005



$\frac{\text{WWW.HAGERSHARP.COM}}{\text{D} \ 202.706.7404}$

<image001.png>

Sender:	Phenix, Adrianne (HHS/OASH)
Recipient:	Bishop-Crawford, Jennifer (OS/OASH)
Sent Date:	2017/02/28 13:24:53
Delivered Date:	2017/02/28 13:24:54



From:	Deb LeBel <(b)(6) @jsi.com>
	<(b)(6)@jsi.com>; Dan, Corinna (OS/OASH) (FYDIBOHF23SPDLT)/cn=Recipients/cn=6411cd3b0ab44a47a781f5aee6fdded5-Corboy, Cor>
Subject:	Viral Hepatitis Updates: The Opioid Epidemic - A National Priority
Date:	2018/03/09 16:22:17
Priority:	Normal
Туре:	Note

From: Corinna Dan [mailto:donotreply@connect.hhs.gov]

Sent: Friday, March 09, 2018 3:35 PM

To: Dan, Corinna (OS/OASH) < Corinna.Dan@hhs.gov>

Subject: Viral Hepatitis Updates: The Opioid Epidemic - A National Priority

Web Version





Viral Hepatitis Updates from the HHS Office of HIV/AIDS and Infectious Disease Policy

Dear Colleague,

This year we have been focused on fostering conversations about the opioid epidemic and how it is affecting the spread of infectious diseases. We're engaging federal, national and local partners to bring examples of the latest evidence and recommendations, strategies being employed, and progress being made at the state and local levels in responding to the opioid epidemic. Stopping the opioid epidemic is a major priority across the nation and is visible in federal funding for these efforts and in the President's budget for 2018 and 2019 as well as in current events such as next week's National Academies meeting and the Hidden Casualties webinars. However, the infectious disease consequences have been much less visible. As the crisis has evolved, more and more organizations are joining efforts to respond to these infectious disease trends.

- The National Academies of Sciences, Engineering, and Medicine is holding a one-and-a-half-day workshop on the infectious disease consequences of the opioid epidemic on March 12th and 13th in Washington, D.C. The workshop will be opened by the new Assistant Secretary for Health, ADM Brett Giroir, M.D., and will provide an opportunity to explore the epidemiology of HIV, hepatitis, and other infectious diseases associated with the opioid epidemic, how these infections are increasing because of the opioid epidemic, and the strategies experts are using to respond. Registration is open to attend the workshop in person or online via webcast.
- We recently held two Hidden Casualties webinars with a combined total of almost 1,300 registrants! These discussed the impact of the opioid epidemic on infectious diseases and shared examples of what national and local partners are doing to respond. Panelists had a chance to describe the guidance, policies, and resources that support their efforts—at the local, state, and national levels—to respond to the opioid epidemic and its infectious disease consequences. A blog summary along with the archived webinar will be available in the coming weeks.
- The Trump Administration recently released the Fiscal Year 2019 budget which
 requests \$5 billion in new resources for the Department of Health and Human Services
 (HHS) over the next five years, including \$1 billion in 2019, to combat the opioid
 epidemic by preventing opioid abuse and helping those who are addicted get access to
 overdose reversal drugs, treatment, and recovery services.

CDC's most recent analysis, a <u>Vital Signs</u> released on March 6, 2018, showed that the opioid overdose epidemic continued to accelerate from 2016 – 2017, highlighting the need to have timely data collection, analysis, and dissemination to enable communities to respond quickly. More information is needed to understand how these trends may affect viral hepatitis and other infectious diseases. We hope our current partners and new partners will join us in working to identify opportunities to continue and/or expand strategic data gathering and planning efforts for hepatitis B and hepatitis C as they relate to the opioid epidemic. You can get more information and guidance on developing your own plan of action for viral hepatitis by downloading our recently released Partner Planning Guide.

18-0153-FOIA/ 000121

This email was sent by: HHS

200 Independence Avenue, S.W., Washington, DC, 20201 United States

Privacy Policy

Update Profile Manage Subscriptions Unsubscribe

Sender:	Deb LeBel (b)(5) _lebel@jsi.com>
Recipient:	\(\begin{align*}\sqrt{b)(6)} \ \ \sqrt{si.com}; \\ Dan, Corinna (OS/OASH)
Sent Date:	2018/03/09 16:20:42
Delivered Date:	2018/03/09 16:22:17



From:	Wasserman, Jill (OS/OPHS)
То:	Broido, Tara (HHS/OASH)
CC:	Bishop-Crawford, Jennifer (OS/OASH) ; Evans, Syreeta (OS/OASH) ; Gianelli, Diane M (OASH) ; Greene, Nicole (OS/OASH) ; Kotwicki, Lauren (HHS/OASH) ; Elizabeth Osborn <eosborn@hagersharp.com>; Tytel, Jessica (OS/OASH) </eosborn@hagersharp.com>
Subject:	OASH Weekly Report 2.28.2018: OWH
Date:	2018/02/28 17:25:38
Priority:	Normal
Туре:	Note

Hi Tara -

Below are the tweets for @HHS_Health:

- RT of @womenshealth tweet about the Women's Mental Health workshop. https://twitter.com/womenshealth/status/967118874482302976
- #Eatingdisorders usually start during the teen years. Check out this info from @girlshealth
 on how to recognize the major signs &get help: http://go.usa.gov/x9E35.
 #NEDAwarenessWeek

Please send either one of the messages below after Wednesday, February 7 but no later than March 9

 National Women and Girls HIV/AIDS Awareness Day is approaching &we are sharing what every woman should know about HIV! Click here to find out more→ https://go.usa.gov/xntm6 #NWGHAAD

Original Link: https://www.womenshealth.gov/nwghaad/





cid:image001.png@01D3B0B5.D4168090

March 10 is National Women and Girls HIV/AIDS Awareness Day! Here's what you can do
to support women and girls about HIV prevention: https://go.usa.gov/xntyg #NWGHAAD

Original Link: https://www.womenshealth.gov/nwghaad/resources/ideas-observing-nwghaad



cid:image002.png@01D3B0B5.D4168090

***Post on March 10**

Report is below.

 Today is National Women and Girls HIV/AIDS Awareness Day! Click here to learn more about the day &how you can help spread the word about HIV prevention: https://go.usa.gov/xntyq #NWGHAAD

Original Link: https://www.womenshealth.gov/nwghaad/resources/fact-sheet



cid:image003.png@01D3B0B5.D4168090

Best,			
Jill			
(b)(5)			



Page 125 Withheld pursuant to exemption

(b)(5)

of the Freedom of Information and Privacy Act

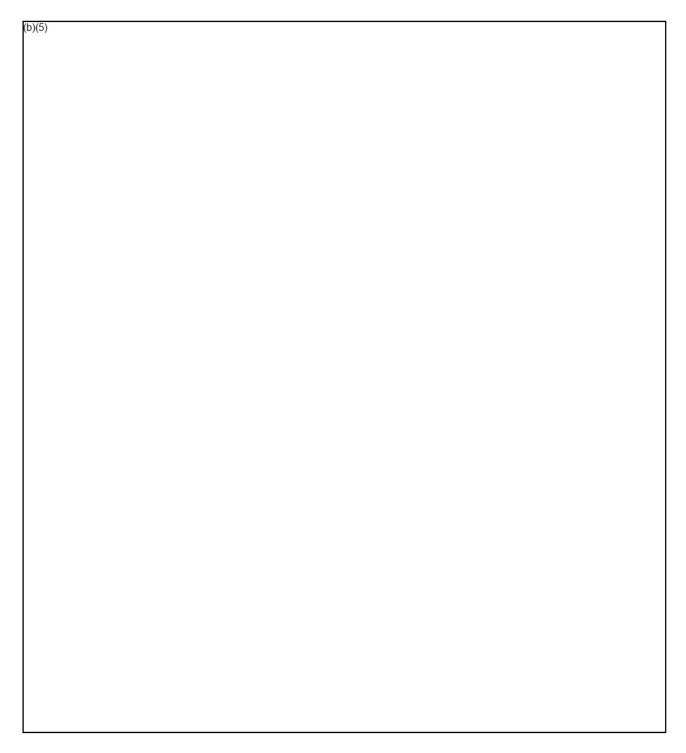


Page 126 Withheld pursuant to exemption

(b)(5)

of the Freedom of Information and Privacy Act





Jill Lauren Wasserman, MPH

Health Education Specialist



OWH_logo_150



Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, SW, Washington, DC 20201

E-mail: Jill.Wasserman1@hhs.gov

Main: 202.690.7650 | Direct: 202.260.9275

Telework Days: Wednesdays & Fridays

	Wasserman, Jill (OS/OPHS)
Sender:	Wasserman, Jill (OS/OPHS)
Recipient:	Broido, Tara (HHS/OASH) ; Bishop-Crawford, Jennifer (OS/OASH) ; Evans, Syreeta (OS/OASH) ; Gianelli, Diane M (OASH) ; Greene, Nicole (OS/OASH) ; Kotwicki, Lauren (HHS/OASH) ; Elizabeth Osborn <eosborn@hagersharp.com>; Tytel, Jessica (OS/OASH) </eosborn@hagersharp.com>
Sent Date:	2018/02/28 17:25:34
Delivered Date:	2018/02/28 17:25:38



	Wasserman, Jill (OS/OPHS)
То:	Tytel, Jessica (OS/OASH)
CC:	Greene, Nicole (OS/OASH) ; Bishop-Crawford, Jennifer (OS/OASH) ; Polacek, Aaron (OS/OASH)
Subject:	RE: Women's Caucus: National Women's Health Week
Date:	2017/03/01 11:34:52
Priority:	Normal
Туре:	Note

Thank you, Jessica. As always, this is very helpful. I'll work with Aaron on this sooner vs. later. - Jill

From: Tytel, Jessica (OS/OASH)

Sent: Tuesday, February 28, 2017 2:20 PM

To: Wasserman, Jill (OS/OPHS)

Cc: Greene, Nicole (OS/OASH); Bishop-Crawford, Jennifer (OS/OASH); Polacek, Aaron (OS/OASH)

Subject: RE: Women's Caucus: National Women's Health Week

_Hi Jill:
Hi Jill: (b)(5)

Let me know if you have any other questions.

Thanks. Jessica

Jessica Tytel, MPH Senior Advisor





OWH_logo_150

Office on Women's Health
U.S. Department of Health and Human Services

E-mail: jessica.tytel@hhs.gov Direct: 202-260-6882

From: Wasserman, Jill (OS/OPHS)

Sent: Tuesday, February 28, 2017 12:21 PM

To: Tytel, Jessica (OS/OASH)

Cc: Greene, Nicole (OS/OASH); Bishop-Crawford, Jennifer (OS/OASH) **Subject:** FW: Women's Caucus: National Women's Health Week

Hi Jessica -

Before you go on maternity leave, I wanted to check in with you on this.

(b)(5)			

Do you mind looking into this and seeing how I should prepare, please?

Thank you,

Jill

From: Goldberg, Janet (HHS/ASL) **Sent:** Friday, May 06, 2016 5:18 PM

To: Singleton, Sara M. (HHS/ASL); Berge, Kathryn (HHS/ASL); Lee, Nancy C. (HHS/OASH); Wasserman,

Jill (OS/OPHS); Tytel, Jessica (OS/OASH); Polacek, Aaron (OS/OASH) **Subject:** FW: Women's Caucus: National Women's Health Week

FYI, the Women's Caucus leadership notified the full caucus.

From: McCarthy, Margaret [mailto:Margaret.McCarthy@mail.house.gov]

Sent: Friday, May 06, 2016 5:16 PM

To: Munasifi, Renee; Moran, Kelsey; Payne, Reagan

Cc: Goldberg, Janet (HHS/ASL)

Subject: Women's Caucus: National Women's Health Week

Dear Women's Caucus Staff,



We wanted to share the below and attached information from HHS about National Women's Health Week, which is next week.

Please contact Janet Goldberg at <u>Janet.Goldberg@hhs.gov</u> if you have any questions.

For the past 17 years, the U.S. Department of Health and Human Services Office on Women's Health has led National Women's Health Week (NWHW). The week serves as a time to help women understand what steps they can take to improve their health. Specifically, we encourage them to get active, eat healthy, pay attention to their mental health, visit a health care provider for a well-woman visit and preventive screenings, and avoid unhealthy behaviors, such as smoking and texting while driving. This year, we will celebrate NWHW from May 8–14, 2016.

We know health needs change as individuals age. Accordingly, we are focusing on women's health needs by decade to help them understand what steps to take for good health and well-being based on their age. For example, women in their 50's generally need to start getting colorectal cancer screenings – and some women should be screened earlier than age 50, if they have certain risk factors. When women know which preventive screenings they need, they can be proactive about their health. As part of NWHW, we educate women about the many preventive services they can receive without a copay, including an annual well-woman visit. Promoting regular care is essential to finding many diseases early, when they are easier to treat.

The Office on Women's Health depends on public officials like you to help us reach women. There are many ways you may join the celebration:

- Issue a proclamation recognizing NWHW.
- Write about NWHW on your website, blog or newsletter. You can also submit an op-ed to a local newspaper about the importance of women's health.
- Engage in NWHW social media activities. Remember to use **#NWHW** in any messages you share about the week.
- Take and promote the NWHW <u>pledge</u>.Direct women to our interactive pledge map, and challenge them to take steps for better health at any age.
- Share our NWHW infographics.
- Join the NWHW Thunderclap and encourage your constituents to do the same.
- Add the NWHW <u>Web banner to your website</u> to direct constituents to important health information and resources on the NWHW website.
- For the latest NWHW news, like the Office on Women's Health on Facebook (<u>facebook.com/HHSOWH</u>) and follow us on Twitter (<u>@womenshealth</u>) and Pinterest (<u>pinterest.com/womenshealth</u>). This will also make it easier to share our content.

We ask that you invite your constituents to support NWHW in any way they feel is appropriate for them. Attached is the NWHW Fact Sheet that you can use to support the celebration.



We hope you will join us in observing NWHW and encourage women to prioritize their health.

Sender:	Wasserman, Jill (OS/OPHS)
Recipient:	Tytel, Jessica (OS/OASH) ; Greene, Nicole (OS/OASH) ; Bishop-Crawford, Jennifer (OS/OASH) ; Polacek, Aaron (OS/OASH)
Sent Date:	2017/03/01 11:34:51
Delivered Date:	2017/03/01 11:34:52



From:	Greene, Nicole (OS/OASH)
To:	Tytel, Jessica (OS/OASH) ; Wasserman, Jill (OS/OPHS)
CC:	Bishop-Crawford, Jennifer (OS/OASH) ; Polacek, Aaron (OS/OASH)
Subject:	RE: Women's Caucus: National Women's Health Week
Date:	2017/02/28 14:41:03
Priority:	Normal
Type:	Note

I will add this to the list for my 1:1 on Thursday in the front office.

Nicole Greene

Acting Director



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Nicole.Greene@hhs.gov

Main: 202-690-7650 | Direct: 202-205-2614

Websites: www.girlshealth.gov | www.girlshealth.gov | <a href="www.girlsh

From: Tytel, Jessica (OS/OASH)

Sent: Tuesday, February 28, 2017 2:20 PM

To: Wasserman, Jill (OS/OPHS)

Cc: Greene, Nicole (OS/OASH); Bishop-Crawford, Jennifer (OS/OASH); Polacek, Aaron (OS/OASH)

9	Subject: RE: Women's Caucus: National Women's Health Week				
Н	i Jill: (5)				
(b)	(5)				
L					



(b)(5)
Let me know if you have any other questions.
Thanks.
Jessica
Jessica Tytel, MPH
Senior Advisor
OWH_logo_150
Office on Women's Health
U.S. Department of Health and Human Services
E-mail: jessica.tytel@hhs.gov Direct: 202-260-6882
From: Wasserman, Jill (OS/OPHS) Sent: Tuesday, February 28, 2017 12:21 PM To: Tytel, Jessica (OS/OASH)
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(b)(5)

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To: Singleton, Sara M. (HHS/ASL); Berge, Kathryn (HHS/ASL); Lee, Nancy C. (HHS/OASH); Wasserman,

Jill (OS/OPHS); Tytel, Jessica (OS/OASH); Polacek, Aaron (OS/OASH) **Subject:** FW: Women's Caucus: National Women's Health Week

FYI, the Women's Caucus leadership notified the full caucus.

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We hope you will join us in observing NWHW and encourage women to prioritize their health.

Sender:	Greene, Nicole (OS/OASH)
Recipient:	Tytel, Jessica (OS/OASH) ; Wasserman, Jill (OS/OPHS) ; Bishop-Crawford, Jennifer (OS/OASH) ; Polacek, Aaron (OS/OASH)
Sent Date:	2017/02/28 14:41:03



	Greene, Nicole (OS/OASH)
	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Subject:	Staff Responsibility List
Date:	2017/02/17 15:13:36
Priority:	Normal
Туре:	Note

DPI Office Projects & Committee/Workgroup Affiliations

Beth Collins Sharp, Division Director Stephanie Alexander, Health Scientist Administrator Project/Program Lead:

CHC, FGC, Mental Health FOA

Committee/Working Group Member:

Mental Health Workgroup, FGC Inter Agency, Healthy People 2020, Adolescent Health Workgroup, Gender SubIPC

Shavon Artis Dickerson, Health Scientist Administrator Project/Program Lead:

- IPV Provider Network Program (Program Lead)
- IPV Provider Network Cross-Site Evaluation Project (Project Lead)

Committee/Working Group Member:

- OWH Mental Health Working Group (Member)
- HHS Steering Committee on Violence Against Women (Co-Chair)
- White House Interagency Working Group on Violence Against Women (OWH Representative)
- White House Gender Sub-Interagency Policy Committee (OWH Representative)
- CDC Community Guide Intimate Partner Violence/Sexual Violence Prevention Coordination
- Review Team (Member)
- Healthy People 2020 Access to Healthcare Services Topic Area (Workgroup Lead Member)
- Healthy People 2020 Family Planning Topic Area Workgroup (Member)
- National Academies of Sciences, Engineering, and Medicine Forum on Global Violence



Prevention (OWH Sponsor Member)

Gustavo Seinos, MPH, Public Health Analyst

Commander Seinos serves as a Public Health Analyst. His specific responsibilities include:

- Serving as the Designated Federal Official (DFO) for the Chronic Fatigue Syndrome;
- Representing OWH as a member of the OASH Committee Management Committee to improve Committee Management activities within the OASH;
- Serving as the OWH contact person for the FOH project; and
- Serving as the OWH representative on the weekly Zika Private Sector Outreach call between CDC, OASH, EIA and ASPR.

Stephen Hayes, Public Health Analyst

Program/Project Lead

Female Genital Cutting (FGC) Community-Centered Health Care and Prevention Projects Grant (Co-lead)

Committee/Working Group Member:

- Summit to End FGM/C Planning Committee
- Summit Health Work Group
- Female Genital Mutilation Federal Inter-Agency Work Group
- Coalitions for a Healthier Community (CHC) Gender-Based Policy Journal Supplement
- CHC Gender-Based Policy Analysis
- Agency for Healthcare Research and Quality (AHRQ) Women's Health Topic Briefs

Topic: Girls' Health and Obesity

- Topic: Women's Mental Health Across the Lifespan
- Topic: Nutritional Needs of Women Over 65
- Topic: Maternal/Interconception Health
- Topic: Health of Family Caregivers of Older Adults
- OWH DSC Translation Activities
- Biweekly-monthly reviews of Spanish language translations of OWH website, fact sheet, and Twitter content
- MotionPoint Spanish Webpage Mirroring
- OWH Mental Health Working Group
- OWH Performance Management System Workgroup



- DPI LEAN Activities
- OWH SharePoint

•

Suzanne G. Haynes Ph.D., Senior Science Advisor Project/Program Lead:

Program Innovation Project XYZ (Project Lead): IAA with CDC on Aces and Weight analysis, IAA with NHLBI on Heart Truth Champions in AA women, IAA with IHS on Opioid detection and treatment.

Committee/Working Group Member:

- HHS Working Group on (Member): Coordinating Committee on LGBT' Issues; Healthy Weight and Nutrition Coordinating committee
- Taskforce on Important Topic (facilitator): Coordinating Committee on Women's Health
- Technical Advisor: Vision Forward, Ace and Weight Design committee, Evaluation of the Make the Call campaign using NEMSIS,
- Guest Editor: Women's Health Issues Policy Supplement on CHC
- Guest Editor: Women's Health Issues: Supplement on Healthy Weight in Lesbian and Bisexual Women (pub July 7,2016),
- OWH Liaison to the United States Breastfeeding Committee
- OWH lead in Heart Disease and Lesbian Health
- Editorial Board: Journal of Human Lactation
- Reviewer: Several National medical and public health journals
- Co-lead: Women's Health EXPO, Calvert County, MD- during Women's Health Week
- Speaker at local and national conferences and forum

Gail McClellan, Secretary

Program/Project Lead &Assist:

- Provide all Administrative services to DPI (and OWH staff as needed)
- IPV Provider Network & Cross-site Evaluation Project (assist)
- HIV/AIDS Project Assistant
- MS Project Management for DPI programs (Lead set-up)
- Max.gov super user (Lead set-up)
- Performance Management System GPRA/PPTS assistant recorder (contract under NORC)
- Grants Solutions (monitor grantee reporting)
- UFMS (upload and search invoice processing)



- COR (assist with contracts as needed)
- SharePoint Administrator
- LEAN Yellow Belt participant
- Quick Health Data Online Revision to Health Information Gateway Project (assist)

Alan Simon, Medical Officer

Program/Project Lead:

Quick Health Data Online Revision to Health Information Gateway (Project Lead)

ACES and Weight (co-researcher)

Make the call, Don't Miss a Beat evaluation (co-researcher)

Evaluation of campaign (in progress)

Sex differences in the Quality of Prehospital EMS Care Nationwide for Chest pain and Cardiac arrest (submitted)

Committee/Working Group Member:

Sports participation in adolescent girls –research paper + potential future work (lead author) (cleared—to be submitted to Pediatrics (soon))

Fact sheet on mental health in women (in progress)

Healthy People adolescent health workgroup (workgroup member)

Healthy People access to care workgroup (workgroup member)

Consulted on several additional OWH projects, including:

Maternal Depression Meeting

Obesity in girls AHRQ evidence summary

Mental Health workgroup

Mental health in women AHRQ evidence summary

HIV in women over 40—vision forward

HIV and IPV training

Potential physical activity in adolescent girl's campaign

Finishing remaining research projects from previous employment (NCHS)---all almost complete

HUD housing assistance and access to care (lead author) (revise and resubmit)

Selected Characteristics of Children of Medicaid and non-Medicaid Covered Births in 1999-

2001: National Health Interview Survey Linked to Medicaid Analytic Extract (coauthor) (in progress)

Birth order and infant mortality due to external causes in the US, 2000-2010 (coauthor) (revise and resubmit)

Contributions of weight status to the racial disparity in asthma prevalence among children and adolescents aged 2-19 years, 1998-2014 (coauthor) (in NCHS/CDC clearance)

U.S. Department of Housing and Urban Development Housing Assistance Programs and Adult Health in the United States (coauthor) (revise and resubmit)



Nicole Greene

Acting Director



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Nicole.Greene@hhs.gov

Main: 202-690-7650 | Direct: 202-205-2614

Websites: www.womenshealth.gov | www.girlshealth.gov OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov Connect with us on: Twitter | Facebook | YouTube

Sender:	Greene, Nicole (OS/OASH)
Recipient:	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent Date:	2017/02/17 15:13:35
Delivered Date:	2017/02/17 15:13:36



From:	Worstell, Mary (HHS/OASH)
To:	OS OWH CCWH ; OS - OPHS-OWH ; OS - OPHS OWH Regions
CC:	Hansen, Cynthia (OS/OASH) ; Novotny, Thomas (HHS/OASH) ; Richmond, Alicia (HHS/OASH) ; Joan Weiss <jweiss@hrsa.gov>; Tumosa, Nina (HRSA) ; Laura Gitlin <(h)(h) @jhu.edu>; <(b)(6) @aol.com></jweiss@hrsa.gov>
Subject:	FW: [MARKETING EMAIL]New Fact Sheet: Women and Long-Term Services and Supports
Date:	2017/04/19 12:36:07
Priority:	Normal
Туре:	Note

Passing along FYI. Mary



Website Banner

Public Policy Long-Term Care Update



Women and Long-Term Services and Supports



With longer average life spans and higher rates of disability and chronic health problems than men, most women will need long-term services and supports (LTSS) in their lifetimes. Women are also the primary providers of LTSS, as the vast majority of both paid direct care workers and unpaid family caregivers are women. Read this new Public Policy Institute (PPI) <u>fact sheet</u> to learn more about how women are at the center of all aspects of LTSS.

<u>Contact Us</u> <u>PPI Website</u> <u>Forward to a Friend</u>

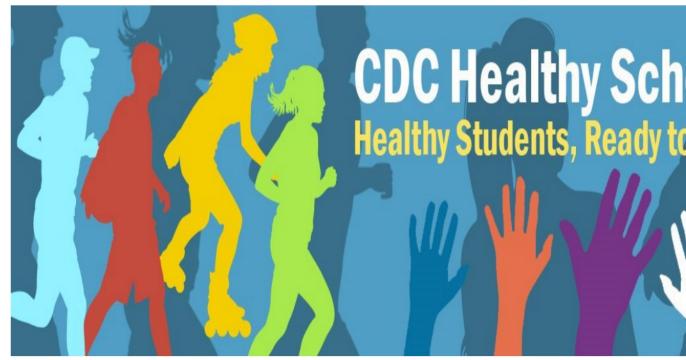
Sender:	Worstell, Mary (HHS/OASH)
Recipient:	OS OWH CCWH ; OS - OPHS-OWH ; OS - OPHS OWH Regions ; Hansen, Cynthia (OS/OASH) ; Novotny, Thomas (HHS/OASH) ; Richmond, Alicia (HHS/OASH) ; Joan Weiss <jweiss@hrsa.gov>; Tumosa, Nina (HRSA) ; Laura Gitlin (b)(6) @jhu.edu>; </jweiss@hrsa.gov>
Sent Date:	2017/04/19 12:35:59
Delivered Date:	2017/04/19 12:36:07



From:	Centers for Disease Control and Prevention (CDC) <cdc@service.govdelivery.com></cdc@service.govdelivery.com>
To:	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Subject:	Centers for Disease Control and Prevention (CDC) Weekly Digest Bulletin
Date:	2017/09/17 06:40:30
Priority:	Normal
Туре:	Note



CDC Releases New Data on the Link Between Health and Acac



Schools Banner



CDC Releases New Data on the Link Between Health and Academic Achievement

A study published in CDC's September 8th issue of the *Morbidity and Mortality Weekly Report (MMWR)* between student health and academic grades. The study confirms that high school students who lack physalso reported lower academic marks.

Using information gathered from the 2015 Youth Risk Behavior Survey (YRBS), researchers in CDC's Hardineships between 10 dietary, physical activity, and sedentary risk behaviors and one measure of acade in school. The data were representative of 9th through 12th graders in US public and private schools and s

(mostly A's) are more likely to:

• Compared with students who reported lower grades (mostly D's/F's), researchers found to

- Engage in physical activity for at least 60 minutes per day on 5 or more days.
- o Play on at least one sports team.

and less likely to:

- Watch television for 3 or more hours per day.
- Play video games or use a computer 3 or more hours per day.
- Compared with students who reported lower grades (mostly D's/F's), researchers found to (mostly A's) are more likely to:
- Eat breakfast on all 7 days.
- Eat fruit, eat vegetables, and drink 100% fruit juice one or more times per day.
- o Drink one or more glasses per day of milk.
- o Not drink a can, bottle, or glass of soda or pop.

The study also confirms a teen has a higher risk of substance use, violence, and suicide when earning low do not prove a causal link between academics and health, they confirm that across nearly all health risk be reported engaging in unhealthy behaviors also struggle academically. On the other hand, students who repetaviors were more likely to report higher grades.

Promoting Healthier Eating Habits and Physical Activity at School

Given the connection between student health and academic outcomes—as well as the amount of time studentified schools as a key setting for improving health. CDC promotes the use of the Whole School, Whomodel that focuses on a child's cognitive, physical, social, and emotional development to improve learning

These findings from the YRBS support the need for health professionals, school officials, and other decis nutrition and physical activity programs and services. This can be done by reinforcing policies and practic



close the achievement gap.

TAKE ACTION

A Whole School, Whole Community, Whole Child approach can help improve student health and educati

- School districts can adopt a local wellness policy that guides efforts to create supportive
 environments. These policies should meet the unique needs of each school in the jurisdiction
 CDC-funded staff in state health departments using State Public Health Actions to provide
 professionals and physical and health education teachers, and resource materials to school
- Schools can assess their nutrition and physical activity policies and practices by complet
 implement strategies found in CDC's School Health Guidelines to Promote Healthy Eating
 establish a wellness committee that includes staff, parents, students, and other community
 and implement a school-wide plan for addressing healthy eating and physical activity in sc
- Parents can help their child's school put into action a local school wellness policy that f
 beverages sold at school, physical education, and physical activity. Parents can volunteer t
 child's school and reinforce health messages taught in school at home. Research shows the
 successful when parents are involved.
- Community groups, organizations, and local businesses can create partnerships with s
 support student learning, development, and health-related activities. The school, its studen
 leaders and staff at the district or school solicits and coordinates information, resources, an
 based organizations, businesses, cultural and civic organizations, social service agencies, f
 colleges and universities, and other community groups.



LEARN MORE

CDC Healthy Schools: Health and Academic Achievement Website

Health and Academic Achievement Overview [PDF]

Fact Sheet: Making the Connection: Dietary Behaviors and Academic Grades, 2015 YRBS

Fact Sheet: Making the Connection: Physical Activity and Sedentary Behaviors and Academic Grades, 20

Fact Sheets: Other Health Behaviors and Conditions and Academic Grades, 2015 YRBS

CDC Vital Signs Town Hall Teleconference - Update

09/12/2017

Vital Signs Town Hall Teleconference

Centers for Disease Control and Prevention. Saving Lives

Recent Trends in Stroke Death Rates

Teleconference Details Word bubble with 3 human stickingures next to a phone handset

UPDATE: Due to the effects of severe weather, the *Vital Signs* Town Halbeen postponed. Once rescheduled, the new day and time will be annot You can also check the **webpage** for the rescheduled date.



Overview

The Vital Signs report is available on the CDC website the first Tuesday of every teleconference provides a forum for state, tribal, local, and territorial health, po officials to broaden the conversation, build momentum, and ensure active imple based, effective programs within the public health areas covered by Vital Signs.

Speakers and topics subject to change. Always check the Vital Signs Town Hall get the most up-to-date information.

Content source: Office for State, Tribal, Local and Territorial Sup

NHIS Early Release Reports - Updates

09/12/2017

You are subscribed to receive email updates regarding NHIS Early Release Reports from the Nationa for Disease Control and Prevention (CDC). The following report has been added recently:

Comparison of the Prevalence of Uninsured Persons From the National Health Interview S Survey, 2016 and 2017

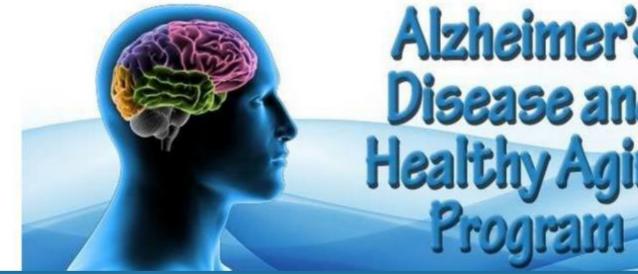
These two surveys are pillars of the federal statistical community's measurement approach to health

Learn more >>

Please join the CDC Public Health Grand Rounds live webcast







Promote Health and Independence

September 12, 2017

You are invited!

Please join the CDC Public Health Grand Rounds live webcast Promoting Well-being in Older Adults." Mark your calendar fo 19, at 1:00 p.m.-2:00pm ET





Healthy Aging: Promoting Well-being in Older Adults

Presented By:

Sarah Lenz Lock, JD

Senior Vice President for Policy

American Association of Retired Persons

Executive Director

Global Council on Brain Health

"Promoting Health, Well-Being and Independence as We Age"

Matthew Baumgart

Senior Director for Public Policy



Alzheimer's Association					
"Healthy Body, Healthy Brain: The State of Science and the Way Forward"					
C. Grace Whiting, JD					
Chief Operating Officer					
National Alliance for Caregiving					
"Healthy Caregiver, Healthy Patient: Importance of Healthy Aging for Caregivers"					
Lisa C. McGuire, PhD					
Lead					
CDC Alzheimer's Disease and Healthy Aging Program					
National Center for Chronic Disease Prevention and Health Promotion					
Centers for Disease Control and Prevention					
"CDC's Healthy Brain Initiative: Moving Forward Together"					
Facilitated By:					
John Iskander, MD, MPH, Scientific Director, Public Health Grand Rounds					
Phoebe Thorpe, MD, MPH, Deputy Scientific Director, Public Health Grand Rounds					



Susan Laird, MSN, RN, Communications Director, Public Health Grand Rounds

Our sessions are open to the public:

The live webcast will be available on our website. Open captions are provided. The link will be live 5 minutes before our archive page at your convenience. Sessions are archived 3-4 days after each presentation.

Grand Rounds is available for continuing education.

Please visithttps://www.cdc.gov/cdcgrandrounds/continuingeduction.htmlfor more information.

For questions about this Grand Rounds topic:

Please e-mail your questions before or during the session.

Public Health Matters: Preparing for the Worst-case Scenario



PUBLIC HEALTH MATTERS

www.cdc.gov

Public Health Matters Blog

Sep. 12, 2017







gency Responders

PUBLIC HEALTH MATTERS BLOG

Preparing for the Worst-case Scenario

Imagine this: Explosions across New York City target elementary schools. Hundre injured and traumatized children, teachers, and parents flood hospital emergence in the five boroughs. Municipal emergency medical services (EMS) are rushing to



INFOGRAPHIC

Week 2: Steady



NATIONAL PREPAREDNESS MONTH

Power of Preparedness



September is National Preparedness Month. Join us as we support emergency preparedness world and encourage everyone to take action! Visit our website for more information about happening this September.

If you would like to partner with us for Preparedness Month, or want more information, con phprcommunications@cdc.gov.

ACTIVATION UPDATE

Hurricane Harvey



IN THE NEWS

• September 12, 2017:

Irma Recovery Begins; Storm Flooded Parts of Florida, South Carolina And Georg

• • September 11, 2017:

Puppies from pet store chain sicken 39 people, CDC says

• • September 11, 2017:

Hurricanes Harvey and Irma may have caused up to \$200 billion in dama to Katrina

September 11, 2017:

Is all that wildfire smoke damaging my lungs?

Slog of the Week

This newsletter is sent out weekly by the CDC Office of Public Health Preparedness and Response. Sign up today

CDC Vital Signs Town Hall Teleconference - September 14, 20

09/13/2017

Vital Signs Town Hall

Centers for Disease Control and



Teleconference

Recent Trends in Stroke Death Rates

Teleconference Details Word bubble with 3 human stick figures next to a phone handset

Join CDC subject matter experts and other public health professionals for a tow teleconference on

Date: Tuesday, September 14, 2017

Time: 2:00 - 3:00 PM (ET)

Phone: **800-857-0764** (US only)

Passcode: **795-4413**

View the presentation and join the teleconference

Overview

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Content source: Office for State, Tribal, Local and Territorial Sup

CDC Vital Signs Town Hall Teleconference - September 14, 20

09/13/2017



Vital Signs Town Hall Teleconference

Centers for Disease Control and Prevention. Saving Lives

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MMWR Vol. 66 / Early Release

09/13/2017



MMWR Early Release Vol. 66, Early Release September 13, 2017

PDF

In this report

Hurricane Season Public Health Preparedness, Response, and Recovery Guidance for Health Care Providers, Reflected Communities — CDC, 2017

CDC 2017 Hurricane Incident Management System Team.

Hurricanes are dangerous and destructive, causing high winds, flooding, heavy rain, and storm surges. CDC/ATS care functions for communities affected and displaced by recent hurricanes and floods. Guidance and technical materials of Spanish.

MMWR Masthead

Stay up-to-date with the "voice of CDC" by downloading the *MMWR* Express app for fast access to *MMWR*: https://www.cdc.gov/mmwr/mmwr_mobileapps.html.

Department of Health and Human Services
Centers for Disease Control and Prevention

AGENDA: CDC Vital Signs Town Hall Teleconference - Septem



3:00 PM (ET)

09/14/2017

Vital Signs Town Hall Teleconference

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Agenda

2:00 PM - Welcome &Introduction

Steven L. Reynolds, MPHDeputy Director, Office for State, Tribal, Local and Territorial Support, CDC

2:05 PM - Vital Signs Overview

Sallyann Coleman King, MD, MSc

Medical epidemiologist, Division for Heart Disease and Stroke Prevention, National Center fo



Health Promotion, CDC

2:15 PM - Presentations

Ian Brissette, PhD

Director, Bureau of Chronic Disease Evaluation and Research, New York State Department o

Mark Wegner, MD, MPH

Chronic disease medical advisor, Bureau of Community Health Promotion, Wisconsin Departi

2:35 PM - Q&A and Discussion

Steven L. Reynolds, MPH

2:55 PM - Wrap Up

3:00 PM - End Call

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MMWR Vol. 66 / No. 36

09/14/2017





MMWR Weekly Vol. 66, No. 36 September 15, 2017

PDF of this issue

In this report

National Preparedness Month — September 2017



The figure above is a poster with the official logo for National Prepare

Every community in the United States should be ready to respond to an infectious disease outbreak, chemical or radiological release, or nature

Assessment of Hospital Emergency Department Response to Potentially Infectious Diseases Using Unannounce 2016

Mary M.K. Foote, MD; Timothy S. Styles, MD; Celia L. Quinn, MD.

Rates and Trends of Pediatric Acute Lymphoblastic Leukemia — United States, 2001–2014 David A. Siegel, MD; S. Jane Henley, MSPH; Jun Li, MD, PhD; et al.

Occupational Animal Exposure Among Persons with Campylobacteriosis and Cryptosporidiosis — Nebraska, 200 Chia-ping Su, MD; Derry T. Stover, MPH; Bryan F. Buss, DVM; et al.

Updated Dosing Instructions for Immune Globulin (Human) GamaSTAN S/D for Hepatitis A Virus Prophylaxis Noele P. Nelson, MD.

Notes from the Field: Vibrio cholerae Serogroup O1, Serotype Inaba — Minnesota, August 2016 Victoria Hall, DVM; Carlota Medus, PhD; George Wahl, MPH; et al.

Announcement: Childhood Cancer Awareness Month — September 2017



Announcement: National Child Passenger Safety Week — September 17–23, 2017

Announcement: Community Preventive Services Task Force Recommendation for Interventions Engaging Comm Management

QuickStats: Percentage of Women Who Missed Taking Oral Contraceptive Pills Among Women Aged 15–44 Yea Had Sexual Intercourse, Overall and by Age and Number of Pills Missed — National Survey Of Family Growth, U

Notifiable Diseases and Mortality Tables
Link to PDF for Notifiable Diseases and Mortality Tables
Link to additional formats for Notifiable Diseases and Mortality Tables

MMWR Masthead

Stay up-to-date with the "voice of CDC" by downloading the *MMWR* Express app for fast access to *MMWR*: https://www.cdc.gov/mmwr/mmwr_mobileapps.html.

Department of Health and Human Services
Centers for Disease Control and Prevention

MMWR Vol. 66 / No. SS-16

09/14/2017



MMWR Surveillance Summaries Vol. 66, No. SS-16 September 15, 2017

PDF



In this report

Surveillance for Certain Health Behaviors and Conditions Among States and Selected Local Areas — Behavioral States, 2013 and 2014

Sonya Gamble, MS; Tebitha Mawokomatanda, MSPH; Fang Xu, PhD; et al.

The Behavioral Risk Factor Surveillance System (BRFSS) is an ongoing, state-based survey of adults aged ≥18 y behaviors, chronic diseases and conditions, access to health care, and use of preventive health services and praiand disability in the United States and participating territories. This BRFSS report includes age-adjusted prevalen conditions for 2013 and 2014.

MMWR Masthead

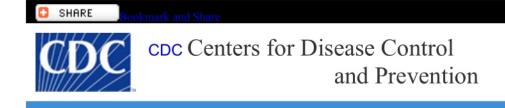
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Department of Health and Human Services
Centers for Disease Control and Prevention

Save the Date! Getting Data Right — and Righteous to Improve Health

09/14/2017

Having trouble viewing this email? https://content.govdelivery.com/accounts/USCDC/bulletins/1b70140



Saving Lives. Protecting People. TM



Save the Date!

CDC's Office of Minority Health and Health Equity Presents

Getting Data Right— and Righteous to Improve Hispanic or Lati

featuring

Alfonso Rodríguez Lainz, PhD, DVM, MPVM

Epidemiologist, U.S.- Mexico Unit, Division of Global Migration and Qua

October 3, 2017

1:00 – 2:00 p.m. ET

This discussion will focus on the importance of population health monitoring program that better capture Hispanics' diversity, and to provide language assistance to assure Latino and Hispanic populations in national health monitoring

Registration is not required. For more information contact OMHHE@



Join Skype Meeting

Trouble Joining? Try Skype Web App



Or Join by phone

(404) 553-8912 (855) 348-8390 Find a local number

Conference ID: 181673

Help

CDC Office of Minority Health and Health Equity

Gynecologic Cancer Resources to Share

09/14/2017



Header image: DCPC Works (Division of Cancer Prevention and www.cdc.gov/cancer Reliable, Trusted, Scientific

Get the Facts About Gynecologic Cancer Brochure

Gynecologic Cancer Resources to Share from

DCPC

September is Gynecologic Cancer Awareness Month. CDC's Inside Knowledge: Get the Facts About Gynecologic Cancer campaign, which educates women about the five main types of gynecologic cancer, has a wide variety of resources for sharing. These include audio and video public service announcements featuring celebrities talking about their gynecologic health experiences, posters, and shareable buttons and badges. Terri, an ovarian cancer survivor, tells her story in a new blog.





Two Opportunities for the Public's Input

The United States Preventive Services Task Force is asking for <u>public comment</u> on its dra screening recommendations. Comments will be accepted until October 9.

Healthy People 2030 is accepting <u>comments from the public</u> on the proposed Healthy Peotherough September 29. Healthy People is a set of goals for a healthier nation.

New Report in MMWR on Pediatric Leukemia

"Rates and Trends of Pediatric Acute Lymphoblastic Leukemia—United States, 2001–201 Siegel, MD, MPH and co-authored by DCPC scientists, highlights demographic and geogr pediatric acute lymphoblastic leukemia (ALL) rates and trends. The authors examined Uni Statistics data to find that incidence of pediatric ALL increased during 2001 to 2008 overal but then was stable during 2008 to 2014. September is Childhood Cancer Awareness Mor

State Teams Attend "80% by 2018" Trainings

Teams from 15 state Comprehensive Cancer Control teams got together to create plans for and partnership as part of a <u>program</u> by CDC and the National Colorectal Cancer Roundta eligible people get screened for colorectal cancer by 2018.

New NCI Publication on Tobacco Control

The National Cancer Institute has released a new publication, <u>A Socioecological Approach</u> <u>Tobacco-Related Health Disparities.</u> It details research showing that progress in reducing not been equally successful across all racial, ethnic, social, and economic groups.

CDC Sponsors Webinar on Tobacco and Cancer-Related Insurance Be

Nuestras Voces: National Alliance for Hispanic Healthcare, a network funded by DCPC and Smoking and Health, will host a training webinar called <u>"Tobacco and Cancer-Related Heather Benefits in Marketplace Plans"</u> on Thursday, September 21 from 1–2 p.m. Eastern time. Hispanic in the United States most likely to be uninsured, and this webinar will help public he health insurance enrollment and benefits to Hispanic communities.

DCPC's Latest Publications

- BRCA genetic testing and receipt of preventive interventions among women age employer-sponsored health insurance in nonmetropolitan and metropolitan areas-2009–2014
- Increasing awareness of gynecologic cancer risks and symptoms among Asian, and Pacific Islander women in the U.S.-Associated Pacific Island Jurisdictions
- Exploring barriers to the receipt of necessary medical care among cancer survivolves
 years
- Values and worries of ovarian cancer patients
 - · Healthcare access and cancer screening among victims of intimate partner viole
 - Cervical cancer screening and prevention in 78 sexually transmitted disease clin



Division of Cancer Prevention and Control <u>Twitter</u> • <u>Facebook</u> • <u>Web</u>

Did You Know? | The link between teen behaviors &lower grade 09/15/2017

Did You Know?
September 15, 2017





- • The academic performance of America's youth is strongly connected to their health.
- US high school students who engage in substance use, risky sexual behaviors, violence, and behaviors are more likely to report lower grades at school.
- Public health departments can partner with education agencies and use CDC tools and resous support student health.

View Did You Know? online

Get Did You Know? on your website

Provided by the
Office for State, Tribal, Local and Territorial Support
Centers for Disease Control and Prevention

Features from this week: Enteroviruses, Lupus, Sickle Cell Dise

cDC CDC In Review





www.cdc.gov/features		
September 15, 2017		
September 13, 2017		





DOTW: Enteroviruses







Vintage alarm clock

Five Minutes for Health

Women: Take five! Or less! Learn about five things ou can do that can go a long way to improve or maintain good health.



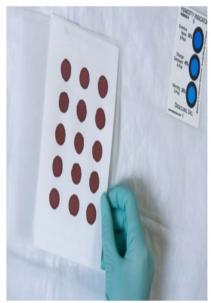


Doctor consoling woman

Lupus among Asians and Hispanics

Lupus is an autoimmune disease that triggers inflammation in different tissues of the body. According to recent studies supported by CDC, Asian women and Hispanic women are more likely to be affected by the disease compared with white women.





Blood spot testing

NSQAP and Babies

Learn about one of the nation's most successful public health programs for newborn screening—CDC's National Center for Environmental Health Lab Quality Program.





Man consulting with healthcare woman

Adult Vaccines

Many adults are at risk for pneumococcal disease. Two vaccines provide protection against this serious and sometimes deadly disease. Talk to your healthcare professional to make sure you are up to date on these and other recommended vaccines.





Large group of college students in circle

Living Well with Sickle Cell Disease

College students with sickle cell disease (SCD) can have a fun and safe college experience by taking a few safety precautions to keep themselves healthy.





Woman talking to healthcare worker

Five Questions to Ask Your Doctor About Cholesterol

You may wonder why you should think about cholesterol. After all, high cholesterol doesn't have any symptoms. But having high cholesterol increases your risk for heart disease, heart attack, and stroke.





Young child with chickenpox

Chickenpox Can Be Serious

Most children who get chickenpox recover completely. But it can be serious, even deadly, especially for babies, pregnant women, adolescents, adults, and people with weakened immune systems. Make sure everyone in your family is up to date on their vaccines.





Cooked turkey

Chicken & Food Poisoning

Americans eat more chicken every year than any other meat. Chicken can be a nutritious choice, but raw chicken is often contaminated with *Campylobacter* bacteria and sometimes with *Salmonella* and *Clostridium perfringens* bacteria.

CDC PHIL Images From This Week

09/15/2017

Having trouble viewing this email? View it as a Web page.



cdc Centers for Disease Control and Prevention



PHIL Images From This Week



Lac tech holding needleless connector 16816

09/14/2017 08:00 AM EDT

This 2014 image depicts Centers for Disease Control (CDC) laboratorian Mustafa M disassembled needleless connector. Such CDC researchers study the formation of b devices like the one shown here, and their impact on their use in the healthcare, and maintenance of a sterile environment is of paramount importance. The presence of a infections related to catheters placed into a patient's bloodstream.



Infant 22494

09/13/2017 08:00 AM EDT

Entitled, "HIV in Uganda", this image was captured by CDC Audio-Visual Product with NCHM. The photo depicts a newborn in Kampala, Uganda, receiving an antiv to-child transmission of HIV. This photo earned Susy the Second Place award in the



Public Health in Action Photo Contest, in the category of International Programs.



Eastern cottonmouth snake 10840

09/12/2017 08:00 AM EDT

This 2008 photograph depicted a venomous eastern cottonmouth snake (also see PF piscivorus, as it was slithering through its moist Edisto, South Carolina environment the largest member of its genus, which includes its copperhead cousin, Agkistrodom through 10851).





Salmonella serotype Typhi bacteria 16877

09/11/2017 08:00 AM EDT

This illustration depicts a three-dimensional (3D) computer-generated image of a magnetic transfer and the artistic recreation was based upon scanning electron microscop presence of numerous thin, short fimbriae emanating from the organisms' cell wall, these bacteria, and the multiple peritrichous flagella, i.e., flagella protruding in all d which provide the bacteria with a mode of motility.

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Dept of Health and Human Services Logo

People, Saving Money. CDC.gov/24-7











CDC Vital Signs™ – Learn about the latest public health data. Read CD

This email was sent to Beth.Collins-Sharp@HHS.gov using GovDelivery, on behalf of: Centers for Disease Control and Prevention • 1600 Clifton Rd • Atlanta, INFO (800-232-4636)

Sender: Centers for Disease Control and Prevention (CDC) <cdc@service.govdelivery.com>

collins Sharp, Beth (OS/OASH/OWH/DPI) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3162cd18b6fe4e3f894fd7ff80c0e17d-



	CollinsShar>
Sent Date:	2017/09/17 06:40:00
Delivered Date:	2017/09/17 06:40:30



From:	Collins Sharp, Beth (OS/OASH/OWH/DPI) ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=3162CD18B6FE4E3F894FD7FF80C0E17D- COLLINSSHAR>
То:	Bishop-Crawford, Jennifer (OS/OASH)
CC:	Greene, Nicole (OS/OASH)
Subject:	RE: Connecting again in Washington DC
Date:	2017/05/15 12:04:50
Priority:	Normal
Туре:	Note

Hello Jenn. Please see pink.

From: Bishop-Crawford, Jennifer (OS/OASH) Sent: Monday, May 15, 2017 10:11 AM To: Collins Sharp, Beth (OS/OASH/OWH/DPI)

Cc: Greene, Nicole (OS/OASH)

Subject: FW: Connecting again in Washington DC

Importance: High

Beth,

(b)(5)

Thanks, Jenn

Thanks for the heads up. Sorry your week started off like this. Best, Beth

From: Leggin, Brooke (HHS/OWH) **Sent:** Monday, May 15, 2017 9:36 AM **To:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: FW: Connecting again in Washington DC



(b)(5)

From: Ceinos, Gustavo (OS/OASH) **Sent:** Friday, May 12, 2017 3:12 PM **To:** Leggin, Brooke (HHS/OWH)

Subject: FW: Connecting again in Washington DC

Hi Brooke. I asked Solve CFS (one of the leading organizations on ME/CFS and a member of CFSAC) to look at the OWH webpage on CFS and provide us with suggestions and updates as to which of the agencies we list on the website are still in operation. I also asked for suggestion as to how we can make that webpage more accurate regarding the illness. These are Solve CFS' suggestions. Would it be possible to update the webpage to reflect the changes made in the attached document? Thanks!

From: Emily Taylor [mailto:(b)(6) @solvecfs.org]

Sent: Thursday, April 27, 2017 11:55 PM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Ceinos, Gustavo (OS/OASH)

Cc: Carol Head

Subject: Connecting again in Washington DC

Dear Beth and Gustavo -

I hope this message finds you both doing well! My sincerest apologies that I was unable to join your meeting in March with Carol. However, I hear that it was a wonderful conversation. I wanted to reach out to you on two items.

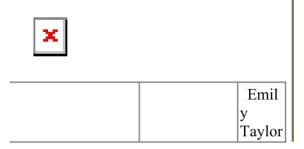
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Secondly, Carol and I will be traveling to DC again for "ME/CFS Advocacy Week" and we would love to meet with you and we would love to continue the conversation with you about moving CFSAC and our work forward. We have availability the afternoon of Tuesday May 16th. Please let me know if you would like to connect, but we understand if the limited time frame makes it difficult.

We can schedule a phone call at a later date if the timing does not work out. As always, we are excited for the opportunity to work with you both and assist in making progress within the agencies for ME/CFS, even in these uncertain times.

All the best,





Director of Advocacy and Public Relations	2		
Solve ME/CFS Initiative			
p: 704-364-0016 ext. 209			
w: www.SolveCFS.org			
	Donate to Solve ME/CFS Initiative		
	Working to make ME/CFS widely understood, diagnosable, and treatable		
Sender:	Collins Sharp, Beth (OS/OASH/OWH/DPI)		
Recipient:	(FYDIBOHF23SPDLT)/c Greene, Nicole (OS/OA	n=Recipier SH) <td>(SH) hts/cn=39a84338d5c743fc9cd63a2fdaaefcdb-Bishop-Craw>; exchangeLabs/ou=Exchange Administrative Group hts/cn=66bf54ed301743d0b71473b5b9f57502-Greene, Nic></td>	(SH) hts/cn=39a84338d5c743fc9cd63a2fdaaefcdb-Bishop-Craw>; exchangeLabs/ou=Exchange Administrative Group hts/cn=66bf54ed301743d0b71473b5b9f57502-Greene, Nic>

Sent Date: 2017/05/15 12:04:50



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То:	Bishop-Crawford, Jennifer (OS/OASH)
CC:	Greene, Nicole (OS/OASH)
Subject:	RE: Connecting again in Washington DC
Date:	2017/05/15 12:41:53
Priority:	Normal
Туре:	Note

Hi again Jenn,

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Thanks, Beth

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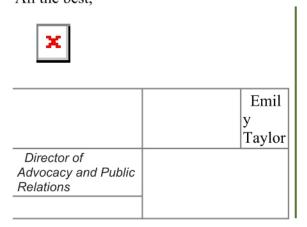
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HHS-18-0191-A-000189

Solve ME/CFS Initiative			
p: 704-364-0016 ext. 209			
w: www.SolveCFS.org			
	Donate to Solve ME/CFS Initiative Working to make ME/CFS widely understood, diagnosable, and treatable		
Sender:	ADMINISTRATIVE GRO	UP	WH/DPI)
Pecinient	(FYDIBOHF23SPDLT)/c Greene, Nicole (OS/OA	n=Recipier SH) <th>ASH) ents/cn=39a84338d5c743fc9cd63a2fdaaefcdb-Bishop-Craw>; ExchangeLabs/ou=Exchange Administrative Group ents/cn=66bf54ed301743d0b71473b5b9f57502-Greene, Nic></th>	ASH) ents/cn=39a84338d5c743fc9cd63a2fdaaefcdb-Bishop-Craw>; ExchangeLabs/ou=Exchange Administrative Group ents/cn=66bf54ed301743d0b71473b5b9f57502-Greene, Nic>

Sent Date: 2017/05/15 12:41:53



	Leggin, Brooke (HHS/OWH)
To:	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Subject:	RE: Website content for your review: Fibroids and Urinary incontinence
Date:	2017/06/27 10:27:48
Priority:	Normal
Туре:	Note

Thanks so much for reviewing and understanding © This is exactly the type of feedback we need!

From: Collins Sharp, Beth (OS/OASH/OWH/DPI)

Sent: Tuesday, June 27, 2017 10:08 AM

To: Leggin, Brooke (HHS/OWH)

Subject: RE: Website content for your review: Fibroids and Urinary incontinence

Hi Brooke,

Here you go. I understand now why these take so long to review. (b)(5)

b)(5) But both topics that I reviewed are ever-changing with lots of research

going on.

Thanks for including me.

Beth

From: Leggin, Brooke (HHS/OWH)

Sent: Wednesday, June 21, 2017 7:51 AM **To:** Collins Sharp, Beth (OS/OASH/OWH/DPI)

Subject: RE: Website content for your review: Fibroids and Urinary incontinence

No worries, I'm still catching up from vacation myself! Thank you!

From: Collins Sharp, Beth (OS/OASH/OWH/DPI)

Sent: Tuesday, June 20, 2017 7:45 PM

To: Leggin, Brooke (HHS/OWH)

Subject: RE: Website content for your review: Fibroids and Urinary incontinence

I brought it on vacation with me. Finally not exhausted so I'll get it to you shortly. This one was much easier.

From: Leggin, Brooke (HHS/OWH) **Sent:** Friday, June 02, 2017 2:00 PM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI)

Subject: Website content for your review: Fibroids and Urinary incontinence

Hello!



Sayeedha was very happy to hear that you were willing to take some of the workload from her with regard to reviewing our website content from an OWH clinician perspective. Thank you for volunteering!

l'm still waiting on our (b)(5)
(b)(5)

These facts sheets are in plain text, so will look a little different online. Don't worry about formatting or page breaks, etc., since the online versions won't have those artifacts. We have had all of the content proofread once, and will have it proofread once again before it goes online, so don't feel like you have to proofread it. We need your practicing, government clinical eye on these. You don't have to suggest new or edited content if you see a concern with the content on the page. Just tell me what the concern is and I will work with our health writers on the best way to address it in plain-language that also takes the other SME feedback we've gotten into consideration.

Let me know if you have any other questions! Thank you! Brooke

Brooke Leggin

Web and Community Manager



OWH_logo_150

Office on Women's Health
U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: brooke.leggin@hhs.gov Work Hours: 7:30 am to 4:00 pm ET

Main: 202-690-7650 | Direct: M, Th, F 202-(b)(6) T, W 301-(b)(6)

Websites: www.womenshealth.gov | www.girlshealth.gov OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov Connect with us on: Twitter | Facebook | YouTube

Sender:	Leggin, Brooke (HHS/OWH)
Recipient:	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent Date:	2017/06/27 10:27:46
Delivered Date:	2017/06/27 10:27:48



From:	Emily Taylor <(b)(6 @solvecfs.org>
To:	Carol Head < (OS/OASH/OWH/DPI)
Subject:	RE: Connecting again in Washington DC
Date:	2017/04/28 12:56:34
Priority:	Normal
Туре:	Note

On our last call – Beth and Gustavo asked us to (b)(5)		
(b)(5) They (b)(5)	Carol, you left that project to me. It took	
me awhile, but I managed to put together my (b)(5)		
(b)(5)		

Emily Taylor

Director of Advocacy and Public Relations

Solve ME/CFS Initiative (704) 364 – 0016 x 209

From: Carol Head

Sent: Friday, April 28, 2017 7:38 AM

To: Emily Taylor <(b)(6) @solvecfs.org>; beth.collins-sharp@hhs.gov

Subject: RE: Connecting again in Washington DC

It's not clear to me what the attachment is? Can you explain? Thanks.



Carol Head

President

Solve ME/CFS Initiative

p: 704-364-0016 ext. 203

w: www.SolveCFS.org



From: Emily Taylor

Sent: Thursday, April 27, 2017 8:55 PM

To: beth.collins-sharp@hhs.gov; Seinos, Gustavo (OS/OASH) <Gustavo.Seinos@hhs.gov>

Cc: Carol Head (b)(6) @solvecfs.org>
Subject: Connecting again in Washington DC

Dear Beth and Gustavo -

I hope this message finds you both doing well! My sincerest apologies that I was unable to join your meeting in March with Carol. However, I hear that it was a wonderful conversation. I wanted to reach out to you on two items.

First, as requested, attached is (b)(5)	
(b)(5)	

I hope this information is helpful. How was the response to the FAQ? We unfortunately did not (b)(5)

Secondly, Carol and I will be traveling to DC again for "ME/CFS Advocacy Week" and we would love to meet with you and we would love to continue the conversation with you about moving CFSAC and our work forward. We have availability the afternoon of Tuesday May 16th. Please let me know if you would like to connect, but we understand if the limited time frame makes it difficult.

We can schedule a phone call at a later date if the timing does not work out. As always, we are excited for the opportunity to work with you both and assist in making progress within the agencies for ME/CFS, even in these uncertain times.

All the best,



Emily Taylor

Director of Advocacy and Public Relations

Solve ME/CFS Initiative

p: 704-364-0016 ext. 209



HHS-18-0191-A-000194

w: www.SolveCFS.org

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Working to make ME/CFS widely understood, diagnosable, and treatable

Sender:	Emily Taylor (h)/6 @solvecfs.org>
Recipient:	Carol Head < (h)/61)@solvecfs.org>; Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent Date:	2017/04/28 12:56:01
Delivered Date:	2017/04/28 12:56:34



	Ceinos, Gustavo (OS/OASH)
	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Subject:	RE: Connecting again in Washington DC
Date:	2017/05/03 15:14:26
Priority:	Normal
Туре:	Note

See below. Thanks.

Hi Emily. Our apologies for the late response to your email.

We would love to meet with you but given the fact we have just published a new Federal Registry Notice asking for three new organizations to represent the interest of ME/CFS patients on CFSAC the timing might not be good since I am assuming your organization will be applying to be on the Committee once more. We will be selecting the new organizations in the upcoming weeks and we would hate to give the impression we are meeting with one of the candidate organizations over the others. This could be viewed as a potential conflict of interest.

The President has nominated an individual to become the new ASH and I think it would be more productive to meet after his appointment because by then we should have a better idea as to where he would like to take not only CFSAC but all the other FACA Committees under his purview.

PS. Thank you for reviewing OWH's website and its content on ME/CFS. I will run your comments by our communications team.

From: Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent: Wednesday, May 03, 2017 2:02 PM

To: Ceinos, Gustavo (OS/OASH)

Subject: RE: Connecting again in Washington DC

Sounds like a plan!

From: Ceinos, Gustavo (OS/OASH)
Sent: Wednesday, May 03, 2017 1:32 PM
To: Collins Sharp, Beth (OS/OASH/OWH/DPI)
Subject: RE: Connecting again in Washington DC

(b)(5)



From: Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent: Wednesday, May 03, 2017 1:30 PM

To: Ceinos, Gustavo (OS/OASH)

Subject: RE: Connecting again in Washington DC

(b)(5)		

We can chat more tomorrow if you like.

Thanks, Beth

From: Ceinos, Gustavo (OS/OASH)
Sent: Wednesday, May 03, 2017 1:04 PM
To: Collins Sharp, Beth (OS/OASH/OWH/DPI)
Subject: FW: Connecting again in Washington DC

Hi Beth. (b)(5)
Advise. Thanks.

From: Emily Taylor [mailto: (h)(6) @solvecfs.org]

Sent: Thursday, April 27, 2017 11:55 PM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Ceinos, Gustavo (OS/OASH)

Cc: Carol Head

Subject: Connecting again in Washington DC

Dear Beth and Gustavo -

I hope this message finds you both doing well! My sincerest apologies that I was unable to join your meeting in March with Carol. However, I hear that it was a wonderful conversation. I wanted to reach out to you on two items.

First, as requested, attached is (b)(5)
(b)(5)

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We can schedule a phone call at a later date if the timing does not work out. As always, we are excited for the opportunity to work with you both and assist in making progress within the agencies for ME/CFS, even in these uncertain times.

All the best,



Emily Taylor

Director of Advocacy and Public Relations

Solve ME/CFS Initiative

p: 704-364-0016 ext. 209

w: www.SolveCFS.org

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Sender:	Ceinos, Gustavo (OS/OASH)
Recipient:	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent Date:	2017/05/03 15:14:25
Delivered Date:	2017/05/03 15:14:26



From:	Kaiser Family Foundation <emails@kff.org></emails@kff.org>
To:	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Subject:	[MARKETING EMAIL] The Latest: Health Reform and Tuesday's Elections; Purchasing Marketplace Plan for Less Than Individual Mandate Penalty; KHN's What the Health? Podcast on Elections & D.C. Developments
Date:	2017/11/10 15:33:06
Priority:	Normal
Туре:	Note

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The Latest

Family Foundation's The Latest-1.png

November 10, 2017

PERSPECTIVE

How the Elections Could Put the Brakes on Anti-ACA Plans

In his Axios column, Drew Altman examines the role of health care in Virginia's elections and the referendum on Medicaid expansion in Maine. His assessment: the elections and the referendum will have a bigger impact on upcoming policy debates about cutting Medicaid to pay for tax cuts, and state interest in Medicaid expansion, than on upcoming elections. (Axios Column)

PODCAST

'What The Health?' We Have Numbers!

Kaiser

Democrats won some unexpectedly large victories in Tuesday's off-off-year elections, putting health care squarely back on the political map. Meanwhile, enrollment was unexpectedly high in the insurance exchanges' opening days, according to the Department of Health and Human Services. In this episode of "What the Health?" the panel discusses the potential political impact of Tuesday's voting, including the success in Maine of a referendum to expand the Medicaid program, as well as the latest



news from Washington, D.C. (KHN)

HEALTH REFORM

How Many of the Uninsured Can Purchase a Marketplace Plan for Less Than Their Shared Responsibility Penalty?



A new KFF analysis finds that more than half (54% or 5.9 million) of the 10.7 million people who are uninsured and eligible to purchase an Affordable Care Act marketplace plan in 2018 could pay less in premiums for health insurance than they would owe as an individual mandate tax penalty for lacking coverage. Within that 5.8 million, about 4.5 million (42% of the total) could obtain a bronze-level plan at no cost in 2018, after taking income-related premium tax credits into account, the analysis finds.

Read the <u>news release</u> and <u>issue brief</u> and <u>view the chart</u> on our website.

More Than Half of Uninsured People Eligible for Marketplaces Can Buy a 2018 Plan for Less than Individual Mandate Penalty

AMONG 10.7 MILLION UNINSURED PEOPLE ELIGIBLE TO BUY A MARKETPLACE PLAN

54%

5.9 Million

Bronze Plan Contribution Less Than

Penalty





Sender:	Kaiser Family Foundation <emails@kff.org></emails@kff.org>
	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent Date:	2017/11/10 15:31:25
Delivered Date:	2017/11/10 15:33:06



From:	Kaiser Family Foundation <emails@kff.org></emails@kff.org>
То:	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Subject:	[MARKETING EMAIL] The Latest: 2017 Changes to Federal Navigator Funding; New Exemptions to Contraceptive Coverage; KHN on People Paying Full Price Under ACA
Date:	2017/10/11 15:48:59
Priority:	Normal
Туре:	Note

Not rendering correctly? View this email as a web page

Kaiser Family Foundation's The Latest

Kaiser Family



Foundation's The Latest

October 11, 2017

PREMIUMS

Overlooked By ACA: Many People Paying Full Price For Insurance 'Getting Slammed'

Millions of people have gained health insurance because of the federal health law. Millions more have seen their existing coverage improved. But one small slice of the population are unquestionably worse off. They are healthy people who buy their own coverage but earn too much to qualify for help paying their premiums. And the premium hikes that are being announced as enrollment looms for next year — in some states, increases topping 50 percent — will make their situations more miserable. (KHN, NPR)

WOMEN'S HEALTH POLICY

New Regulations Broadening Employer Exemptions to Contraceptive Coverage: Impact on Women

A new brief explains the contraceptive coverage rule under the Affordable Care Act, the impact it has had on coverage, and how the new regulations issued by the Trump administration have changed the contraceptive coverage requirement for employers with religious and moral objections to contraception and the women who receive coverage through their plans. (News Release, Issue Brief)



HEALTH REFORM

Changes in 2017 Federal Navigator Funding

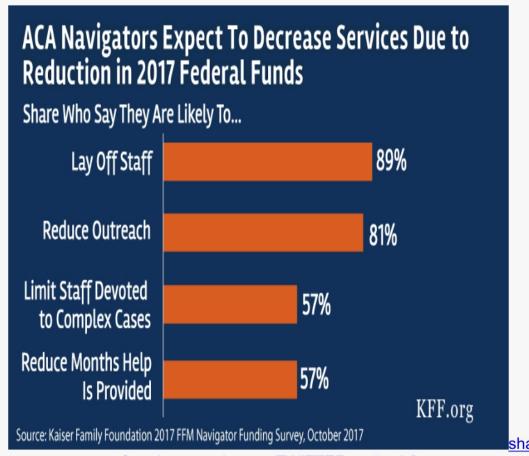
A new analysis looks at federal funding changes for Affordable Care Act marketplace navigators in 2017 and discusses the implications for both the navigators and consumers. It presents results of a an online survey of federal marketplace (FFM) navigator programs and includes insights from a meeting of more than 40 navigators co-hosted by the Robert Wood Johnson Foundation &KFF.

Read the Issue Brief

Read the

Issue Brief





e-of-navigators-who-say-TWITTER-revised-2.png

News and Headlines



News and headlines from Kaiser Health News (KHN) and California Healthline (CHL). Follow KHN on Facebook, Twitter, and LinkedIn, and CHL on Facebook and Twitter, for the latest updates.

- Overlooked By ACA: Many People Paying Full Price For Insurance 'Getting Slammed' (KHN, NPR)
- Patients, Health Insurers Challenge Iowa's Privatized Medicaid (KHN, NPR)
- New Law Challenges 'Evils' Of Pharma Profits, California Governor Claims (KHN, KQED)
- Training New Doctors Right Where They're Needed (CHL, PRI)
- In Oregon, End-of-Life Wishes Are Just A Click Away (KHN, CNN)
- Your Grandma's Guide To Grass: Calif. Rolls Out Website To Cut Through Cannabis Haze (<u>CHL</u>, <u>US</u> News &World Report)
- Long-Term Disability Insurance Gets Little Attention But Can Pay Off Big Time (KHN)
- Social Media Is Harming The Minds Of Our Youth, Right? Maybe Not. (CHL, USA Today)
- Latest news summaries from the <u>KHN Morning Briefing</u>

Data and Analysis

The latest in health policy data and analysis from the Kaiser Family Foundation.



- Data Note: Changes in 2017 Federal Navigator Funding (News Release, Issue Brief)
- New Regulations Broadening Employer Exemptions to Contraceptive Coverage: Impact on Women (News Release, Issue Brief)
- Updated: Medicare Advantage (<u>Fact Sheet</u>)
- Medicaid in Uncertain Times: Results from a 50-State Medicaid Budget Survey for State Fiscal Years
 2017 and 2018 at a Forum with the National Association of Medicaid Directors (Event)
- Medicare Open Enrollment FAQs (FAQs)
- Latest news summaries from the <u>Kaiser Daily Global Health Policy Report</u>

The Buzz

See what's driving health policy conversation on social media. Follow Kaiser Family Foundation on Facebook, Twitter, and LinkedIn for the latest updates and perspectives.







Big questions for the Trump executive order. Will it...

Apply to individuals & small businesses? Preempt states? Loosen the mandate penalty?

10:02 AM - 9 Oct 2017



larry-tweet-10-11.png

Filling the need for trusted information on national health issues, the Kaiser Family Foundation is a nonprofit organization based in Menlo Park, California.

kff.org | khn.org



Did someone forward this to you? Sign up for email updates.

This email was sent to beth.collins-sharp@hhs.gov. <u>Update your email preferences</u> to choose the types of emails you receive. Or, <u>permanently unsubscribe from all future emails</u>.

If you need help or have questions, please send an email to subscriptions@kff.org.

Please do not reply to this email as this address is not monitored.

Kaiser Family Foundation & Kaiser Health News 2400 Sand Hill Road Menlo Park, CA 94025

Sender:	Kaiser Family Foundation <emails@kff.org></emails@kff.org>
	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent Date:	2017/10/11 15:47:36
Delivered Date:	2017/10/11 15:48:59



From:	Ceinos, Gustavo (OS/OASH)
To:	Greene, Nicole (OS/OASH) ; Collins Sharp, Beth (OS/OASH/OWH/DPI)
Subject:	RE: Scheduling a meeting regarding ME/CFS
Date:	2017/05/16 14:29:04
Priority:	Normal
Туре:	Note

Yes. See attachment.

From: Greene, Nicole (OS/OASH)

Sent: Wednesday, May 10, 2017 7:00 PM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Ceinos, Gustavo (OS/OASH)

Subject: Fwd: Scheduling a meeting regarding ME/CFS

Hi! Did you all ever get in touch with Emily?

Nicole

From: "Emily Taylor" <(b)(6) @solvecfs.org>

Subject: RE: Scheduling a meeting regarding ME/CFS

Date: 10 May 2017 16:50

To: "Greene, Nicole (OS/OASH)" < <u>Nicole.Greene@hhs.gov</u>>

Hello again Ms. Greene -

I am sorry we will not be able to meet during our organization's next visit to Washington DC. I hope you and your team will consider joining us at our Capitol Hill briefing regarding ME/CFS. Please see the attached invitation for additional details.

Also, please feel free to share the briefing flyer with any of your colleagues that might be interested.

All the best,

Emily Taylor

Director of Advocacy and Public Relations Solve ME/CFS Initiative (704) 364 – 0016 x 209

From: Emily Taylor

Sent: Thursday, April 27, 2017 10:36 PM



To: 'nicole.greene@hhs.gov' < nicole.greene@hhs.gov > Subject: Scheduling a meeting regarding ME/CFS

Dear Ms. Greene -

My name is Emily Taylor and I am the Director of Advocacy and Public Relations for the Solve ME/CFS Initiative. Our organization is the leading national non-profit conducting research and advocacy for chronic fatigue syndrome, also known as myalgic encephalomyelitis, or ME/CFS.

Our organization's leadership including our President and CEO, Carol Head, our Chief Scientific Officer Dr. Zaher Nahle, and representatives from board of directors are traveling to Washington DC for ME/CFS Advocacy Week May 15th – May 18th. With several partner organizations and 55 patients advocates we will be conducting a Capitol Hill lobby day and a congressional briefing, sponsored by Senator Markey, called "The Invisible Health Crisis: ME/CFS (Chronic Fatigue Syndrome)"

We'd like to invite you and your team at the Office on Women's Health to attend. Details are included in the flyer attached.

While we are in town, it would be wonderful if we could meet to discuss our efforts and how our organization can be a partner to your efforts regarding this devastating chronic disease that affects women at four times the rate of men.

Please let me know if you have any availability to meet on May 16th – May 18th.

Very much looking to your reply.

All the best,



Emily Taylor

Director of Advocacy and Public Relations

Solve ME/CFS Initiative

p: 704-364-0016 ext. 209

w: www.SolveCFS.org

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Working to make ME/CFS widely understood, diagnosable, and treatable

Sender:	Ceinos, Gustavo (OS/OASH)
Recipient:	Greene, Nicole (OS/OASH) ; Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent Date:	2017/05/16 14:29:03
Delivered Date:	2017/05/16 14:29:04
From:	Ceinos, Gustavo (OS/OASH)



	Emily Taylor Collins Sharp, Beth (OS/OASH/OWH/DPI)
CC:	Carol Head (h)(6) @solvecfs.org>
Subject:	RE: Connecting again in Washington DC
Date:	2017/05/04 09:30:00
Priority:	Normal
Туре:	Note

Hi Emily. Our apologies for the late response to your email.

We would love to meet with you but given the fact we have just published a new Federal Registry Notice asking for three new organizations to represent the interest of ME/CFS patients on CFSAC the timing might not be good since I am assuming your organization will be applying to be on the Committee once more. We will be selecting the new organizations in the upcoming weeks and we would hate to give the impression we are meeting with one of the candidate organizations over the others. This could be viewed as a potential conflict of interest.

The President has nominated an individual to become the new ASH and I think it would be more productive to meet after his appointment because by then we should have a better idea as to where he would like to take not only CFSAC but all the other FACA Committees under his purview.

PS. Thank you for reviewing OWH's website and its content on ME/CFS. I will run your comments by our communications team.

From: Emily Taylor [mailto (b)(6) @solvecfs.org]

Sent: Thursday, April 27, 2017 11:55 PM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Ceinos, Gustavo (OS/OASH)

Cc: Carol Head

Subject: Connecting again in Washington DC

Dear Beth and Gustavo -

I hope this message finds you both doing well! My sincerest apologies that I was unable to join your meeting in March with Carol. However, I hear that it was a wonderful conversation. I wanted to reach out to you on two items.

First, as requested, attached is a (b)(5)

(b)(5)

I hope this information is helpful. How was the response to the FAQ? We unfortunately (b)(5)

(b)(5)

Secondly, Carol and I will be traveling to DC again for "ME/CFS Advocacy Week" and we would love to meet with you and we would love to continue the conversation with you about moving CFSAC and our work forward. We have availability the afternoon of Tuesday May 16th. Please let me know if you would like to connect, but we understand if the limited time frame makes it difficult.

We can schedule a phone call at a later date if the timing does not work out. As always, we are excited for the opportunity to work with you both and assist in making progress within the agencies for ME/CFS, even in these uncertain times.

All the best,





		Emil
		<u>y</u> .
		Taylor
Director of		
Advocacy and Public		
Relations		
Solve ME/CFS		
Initiative		
p: 704-364-0016		
ext. 209		
W:		
www.SolveCFS.org		.
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	<u>Initiative</u>	
	Working to	
	make	
	ME/CFS	
	widely understood,	
	diagnosable,	
	and treatable	
	Ceinos, Gustavo (OS,	/OASH) < /

Sender:	Ceinos, Gustavo (OS/OASH)
Recipient:	Emily Taylor < @n)/6 @solvecfs.org>; Collins Sharp, Beth (OS/OASH/OWH/DPI) ; Carol Head <cehead@solvecfs.org></cehead@solvecfs.org>
Sent Date:	2017/05/04 09:30:20
Delivered Date:	2017/05/04 09:30:00



From:	Emily Taylor (1)(6)@solvecfs.org>
To:	Ceinos, Gustavo (OS/OASH) <pre>/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=2acfc0cbf99243f18aa76c4d9c6014ed-Seinos, Gus>; Collins Sharp, Beth (OS/OASH/OWH/DPI) <pre>/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3162cd18b6fe4e3f894fd7ff80c0e17d- CollinsShar></pre></pre>
CC:	Carol Head (h)(6)@solvecfs.org>
Subject:	RE: Connecting again in Washington DC
Date:	2017/05/05 22:11:27
Priority:	Normal
Туре:	Note

Hello Gustavo -

Thank you for your clear and honest breakdown! We are so eager to make progress that we often do not factor in the larger responsibilities and roles you face. Yes —we do plan to submit our organization as a representative for CFSAC again. Thank you for efforts to improve the government response to ME/CFS. We see so much potential for CFSAC to make a difference.

As always, please let us know if there's anything else we can do to assist.

All the best,

Emily Taylor

Director of Advocacy and Public Relations

Solve ME/CFS Initiative (704) 364 – 0016 x 209

From: Ceinos, Gustavo (OS/OASH) [mailto:Gustavo.Ceinos@hhs.gov]

Sent: Thursday, May 04, 2017 6:30 AM

To: Emily Taylor < @solvecfs.org>; Collins Sharp, Beth (OS/OASH/OWH/DPI) < Beth. Collins-

Sharp@hhs.gov>

Cc: Carol Head <(b)(6) @solvecfs.org>

Subject: RE: Connecting again in Washington DC

Hi Emily. Our apologies for the late response to your email.

We would love to meet with you but given the fact we have just published a new Federal Registry Notice asking for three new organizations to represent the interest of ME/CFS patients on CFSAC the timing might not be good since I am assuming your organization will be applying to be on the Committee once more. We will be selecting the new organizations in the upcoming weeks and we would hate to give the impression we are



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PS. Thank you for reviewing OWH's website and its content on ME/CFS. I will run your comments by our communications team.

From: Emily Taylor [mailto: (h)(6) @solvecfs.org]

Sent: Thursday, April 27, 2017 11:55 PM

To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Ceinos, Gustavo (OS/OASH)

Cc: Carol Head

Subject: Connecting again in Washington DC

Dear Beth and Gustavo -

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(b)(5)

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All the best.



Emily Taylor

Director of Advocacy and Public Relations



Solve ME/CFS Initiative

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Sender:	Emily Taylor < (b)/6 @solvecfs.org>
Recipient:	Ceinos, Gustavo (OS/OASH) ; Collins Sharp, Beth (OS/OASH/OWH/DPI) ; Carol Head
Sent Date:	2017/05/05 22:11:13
Delivered Date:	2017/05/05 22:11:27



From:	Kaiser Health News <emails@kaiserhealthnews.org></emails@kaiserhealthnews.org>
To:	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Subject:	[MARKETING EMAIL]KHN First Edition: November 10, 2017
Date:	2017/11/10 06:36:38
Priority:	Normal
Туре:	Note



First Edition

Friday, November 10, 2017

Check Kaiser Health News online for the latest headlines

Today's early morning highlights from the major news organizations.

Kaiser Health News: Obamacare Shopping Is Trickier Than Ever. Here's A Cheat Sheet.

Health care is complicated. Shopping for an individual health plan just got even more so, with President Donald Trump's decision last month to block \$7 billion in Affordable Care Act subsidies. Known as cost-sharing reduction payments (CSRs), these federal funds had helped insurers offset the costs of the discounts they are required to offer to some lower-earning customers to help them pay for deductibles and copays. (Hancock, 11/10)

Kaiser Health News: Pressure Builds To Cut Medicare Patients In On Prescription Deals

Medicare enrollees, who have watched their out-of-pocket spending on prescription drugs climb in recent years, might be in for a break. Federal officials are exploring how beneficiaries could get a share of certain behind-the-scenes fees and discounts negotiated by insurers and pharmacy benefit managers, or PBMs, who together



administer Medicare's Part D drug program. Supporters say this could help enrollees by reducing the price tag of their prescription drugs and slow their approach to the coverage gap in the Part D program. (Tribble, 11/10)

Kaiser Health News: Laws To Equalize Cancer Patients' Out-Of-Pocket Costs Provide Uneven Protection

Laws passed by many states that require health plans to charge the same cost-sharing amounts for cancer patients receiving chemotherapy — regardless of whether they get the medication intravenously or take a pill or liquid by mouth — are providing uneven pocketbook protection, according to a new study. These "parity" laws became popular as the number of pricey anti-cancer oral medications grew, but consumers were seeing a disparity in how insurance handled the patients' share of the treatment. (Andrews, 11/10)

Kaiser Health News: Experts Explain Why Lead Found In Fidget Spinners Is No Idle Threat

That fidget spinner your kid can't put down? It turns out it may be putting children at risk for lead exposure. That's according to a report out Thursday from a consumer advocacy group, the U.S. Public Interest Research Group Education Fund. The organization tested the toys — which represent the latest iteration of a long line of skill-based amusements that include yo-yos and spinning tops — for lead. (Luthra, 11/10)

California Healthline: Teaching Teens The Perils Of Pot As Marketplace Grows
After Yarly Raygoza attended the drug prevention program at the Boys & Girls Club
here last year, she used what she learned to talk a few friends out of using marijuana.
The 14-year-old took the class again this year but worries that counseling her friends
will become more difficult. (Gorman, 11/10)

The New York Times: Pace Of Sign-Ups Under Affordable Care Act Blows Past Prior Years

More than 600,000 people signed up last week for health insurance under the Affordable Care Act, significantly beating the pace of prior years as consumers defied President Trump's assertion that the marketplace was collapsing. (Pear, 11/9)

The Associated Press: Despite Trump's Scorn, Early 'Obamacare' Sign-Ups Top 600k

With only four days of data, experts said it's hard to discern a trend. But definitely the Affordable Care Act doesn't seem to be collapsing. If anything sign-ups for 2018 are on track with previous years. Figures from the Centers for Medicare and Medicaid Services showed that 601,462 people signed up Nov. 1-4 in the 39 states served by the federal HealthCare.gov website. Of those consumers, about 77 percent were renewing their coverage, and about 23 percent were new customers, a split that mirrors previous years. (11/9)

USA Today: Feds' Obamacare Site Does Biggest Business Yet, While About Half Of People Can Pay \$0



Consumers are flocking to the Affordable Care Act (ACA) exchanges to buy insurance, setting a record in the first few days of open enrollment, federal numbers out Thursday show. Total daily sign-ups were up 79% for the first few days Healthcare.gov was open, compared to the equivalent period last year. Open enrollment started Nov. 1 and runs through Dec. 15. (O'Donnell, 11/9)

The Washington Post: More Than 600,000 Consumers Select ACA Plans At Start Of Enrollment, CMS Says

While CMS officials did not provide a direct comparison with any of the four previous enrollment periods, administration officials said that more than 200,000 consumers selected plans on the first day, more than double the number last year. The officials spoke about the first-day figure on the condition of anonymity because they were not authorized to disclose it. The overall total for the initial four days compares with just over 1 million Americans who signed up on the federal exchange during the first 12 days of open enrollment in 2016. (Eilperin and Goldstein, 11/9)

The Wall Street Journal: Insurers See Jump in Sign-Ups for Affordable Care Act Insurers suggested the early influx was partly sparked by the spotlight on the ACA amid Republican efforts to repeal or change it. "You couldn't have paid for that kind of advertising," said Steve Ringel, president of the Ohio market for CareSource, which sells ACA plans in four states. "It doesn't matter what the story line is, it's drawing attention to the marketplace." (Wilde Mathews, 11/9)

Los Angeles Times: Signups For Obamacare Insurance Coverage Surge, Despite Trump Administration Attacks

The pace of signups cheered supporters of the healthcare law, many of whom feared that President Trump's criticism of the law, coupled with major cuts in federal funding for advertising and outreach efforts, would depress enrollment. At six weeks, the enrollment period is also only half as long this year, running until Dec. 15. (Levey, 11/9)

Reuters: Amid Trump Cuts, Uber Kicks Off Campaign To Enroll Drivers In Obamacare

Uber Technologies Inc and some smaller technology companies are launching campaigns to publicize Obamacare enrollment among their contract workers after the Trump administration slashed government marketing for the health program by 90 percent. Freelance and contract workers are an important part of the workforce for many Silicon Valley companies, including drivers at Uber and rival Lyft Inc, and technology companies also have been among the most vocal in confronting Trump administration policies - particularly immigration - that they perceive as hurting their workforce. (Rodriguez, 11/9)

The Wall Street Journal: Elections Results Suggest GOP Lost Edge on Health Care

The Republicans are losing their seven-year political advantage on health care, this week's election results suggest, a shift that affects everything from candidates' campaign messages to lawmakers' policy choices to the level of enrollment for the



Affordable Care Act. Republicans have won national and state elections for seven years by attacking the ACA. But this week, Virginia voters cited health care in exit polls as a major reason for delivering the governorship to Democrat Ralph Northam and Maine residents voted decisively to expand Medicaid. (Armour, 11/9)

The Wall Street Journal: Trump Official Says Medicaid Expansion Not Sustainable Without Changes

Medicaid, the federal-state health-insurance program, was never designed for low-income but able-bodied adults and is unsustainable without major changes, a top Trump administration health official said Thursday. "One of the major fundamental flaws in the Affordable Care Act was putting in able-bodied adults into a program that was designed for disabled people," said Seema Verma, the Centers for Medicare and Medicaid Services administrator, who oversees Medicaid as well as implementation of the ACA, popularly known as Obamacare. "It stretched the safety net and it jeopardizes care for the individuals that the program was originally intended for." (Radnofsky, 11/9)

The Associated Press: Virginia's Electoral Changes Boost Medicaid Expansion Odds

This week's groundswell of political change in Virginia has improved the odds of Medicaid expansion becoming law there. The long-stalled liberal priority gained new life after Democrats nearly wiped out Republicans' overwhelming majority in the House of Delegates. For years Medicaid expansion, a key part of former President Barack Obama's health care law, has been a non-starter in the Old Dominion. (11/9)

CQ: West Virginia Could Close Children's Health Program

West Virginia could close its Children's Health Insurance Program as early as February if Congress does not act soon to renew federal funds for the program. The state's CHIP board of directors voted Wednesday to close enrollment on Feb. 28, 2018, if funds are not provided before then. If needed, notifications with additional information will be sent to families and providers in early January, but benefits would continue as usual until the end of February. (Raman, 11/9)

The Hill: Initial Senate Tax Bill Does Not Repeal ObamaCare Mandate

The tax-reform bill that Senate Republicans are releasing Thursday does not repeal ObamaCare's individual insurance mandate, though the provision could be added down the line, GOP senators said. Senators leaving a briefing about the legislation said repealing the mandate is not in the initial text of the legislation, but cautioned that the issue is still under discussion. (Sullivan, 11/9)

The Hill: Senate Keeps Medical Expenses Deduction In Break With House

The Senate GOP tax bill will retain a key deduction for qualified medical expenses that was excluded from the House version, according to a Republican senator on the Senate Finance Committee. Sen. Bill Cassidy (R-La.) told reporters that the deduction will remain in the initial version of legislation the Senate is set to unveil today. (Weixel, 11/9)



The New York Times: With Obamacare Fight Lost, Conservatives Turn To Veterans' Care

With their hopes of repealing the Affordable Care Act dashed for now, deep-pocketed conservative activists have turned their attention to a smaller but still potent new effort: allowing private health care to compete with Veterans Affairs hospitals for the patronage of the nation's veterans. Concerned Veterans for America, a little-known advocacy group backed by the conservative billionaire industrialists Charles G. and David H. Koch, is pressing Republicans to make it easier for veterans to see private doctors at government expense. The group's voice had been lonely until recently, when a raft of Koch-connected advocacy organizations and other conservative allies joined the effort. (Fandos, 11/9)

The Washington Post: Controversy Erupts Over Plan To Let Pentagon Authorize Unapproved Drugs For Battlefield Use

Should the Pentagon be allowed to authorize the use of unapproved drugs and medical devices on an emergency basis for combat soldiers? That question has sparked a furious battle this week among some of Washington's biggest power players, with the Defense Department and its congressional advocates on one side and the Food and Drug Administration and the health committees on the other. (McGinley, 11/9)

The Associated Press Fact Check: Trump Falls Short On Promises To Veterans

President Donald Trump is pointing to big achievements in advance of Veterans Day on his campaign promise to fix the Department of Veterans Affairs, just 10 months into his administration. But several of the initiatives are far from bold or as immediate as claimed. In a two-page fact sheet this week, the White House declares that "tremendous progress has been made in a short period of time." (11/10)

The Associated Press: DEA Cracking Down On Fake Fentanyl Traffickers

The U.S. Drug Enforcement Administration wants to make it easier for federal prosecutors to go after people who peddle illicit versions of the deadly opioid fentanyl that are fueling the nation's drug abuse crisis. The agency said Thursday it intends to classify drugs that are chemically similar to fentanyl as illegal controlled substances, letting prosecutors avoid the hurdles they often face in bringing charges in such cases. (Gurman, 11/9)

The Hill: Feds Move To Crack Down On Opioid Trafficking

The Drug Enforcement Administration (DEA) intends to temporarily schedule all fentanyl-related substances on an emergency basis, the Justice Department announced Thursday. That classification will let prosecutors charge people trafficking substances similar to fentanyl with the same charges as fentanyl, which is up to 50 times more potent than heroin. (Roubein, 11/9)

Stat: The White House Punted To Congress On Opioids Funding. Congress Doesn'T Have A Plan

The Trump administration declared the opioid crisis a public health emergency two weeks ago. Six days later, a White House-appointed panel proposed a national drug



court system, a dramatic increase in addiction treatment beds, and what President Trump called "really tough, really big, really great advertising" to warn of the perils of drug use. Neither the White House nor Congress has suggested how to pay for those measures. (Facher and Mershon, 11/9)

USA Today: It's Far More Than Overdoses: IV Opioid Users' Diseases Overwhelm Hospitals

Sarah Bolin's heart infection got so bad last month, the longtime heroin user was passing out by the time she got to Cincinnati's Christ Hospital. She was relieved the infection — called endocarditis — didn't require her to get a pacemaker or replacement heart valve like so many other "girls on the streets." It did require surgery to remove lesions from infected valves, a 10-day hospital stay and weeks of IV antibiotics and nursing home care. (O'Donnell and DeMio, 11/8)

Politico: Hospitals And PhRMA Face Off Over Drug Prices And 340B Program

President Donald Trump promised to crack down on drug companies "getting away with murder," but it turns out that it's hospitals taking it on the chin over the cost of medicine. There's a big, expensive fight brewing between the two powerful lobbies around a somewhat obscure drug discount program called 340B. (Pittman, 11/9)

Stat: Vermont Probes Whether Drug Makers Violated Its Gift Ban

The Vermont attorney general is investigating the extent to which drug and device makers may have violated state law by giving gifts or payments for other items to health care providers, according to a source familiar with the matter. The state banned industry gift giving to health care providers eight years ago over concerns such payments may influence medical practice, a contentious issue that later led the federal government to create a database to which drug and device makers must report any payments to physicians and teaching hospitals. (Silverman, 11/9)

Stat: Sage Therapeutics Drug Reduces Postpartum Depression In Two Late-Stage Clinical Trials

Sage Therapeutics (SAGE) reported positive results Thursday from two late-stage clinical trials of its lead drug brexanolone in women suffering from postpartum depression. Both brexanolone trials achieved their primary endpoints, but the results are not without question marks. An infusion of brexanolone reduced depressive symptoms compared to placebo after 60 hours of treatment in women with both severe and moderate postpartum depression. However, the antidepressive effect of brexanolone was modest and didn't last long in women with moderate postpartum depression. (Feuerstein, 11/9)

The New York Times: Violence Against Transgender People Is On The Rise, Advocates Say

On Oct. 21, a body was found off a county road west of Corpus Christi, Tex., with bullet wounds to the chest, abdomen and shoulders. The victim was Stephanie Montez, a transgender woman. But because the police misidentified her as a man, it was not until last week that Ms. Montez, 47, was known to be among the more than two dozen



transgender Americans killed this year. (Astor, 11/9)

Reuters: 1 In 5 U.S. Adults Used Tobacco In 2015: Government Study

One in five adults in the United States was using some form of tobacco in 2015, according to national survey data released on Thursday by the U.S. Centers for Disease Control and Prevention. The report, conducted in conjunction with the Food and Drug Administration, found 21 percent of U.S. adults, or 49 million people, were tobacco users. Of them, about 87 percent reported smoking cigarettes, cigars or some form of pipe. (Steenhuysen, 11/9)

Los Angeles Times: Fidget Spinners Sold At Target Contain Dangerous Levels Of Lead, Advocacy Group Says

Fidget spinners — the multipronged, whirling gadgets that became so popular this year that some schools banned them as a distraction — have been marketed as playful diversions meant to help people calm down and focus. But now a consumer advocacy group says that two types of fidget spinners being sold at Target could be dangerous. The items — Fidget Wild Premium Spinner Brass and Fidget Wild Premium Spinner Metal — were found to contain as much as 330 times the federal legal limit for lead in children's products, according to lab tests conducted for the U.S. Public Interest Research Group, or U.S. PIRG, Education Fund. (Bhattarai, 11/9)

NPR: Algae Toxins In Drinking Water Sickened People In 2 Outbreaks

The city of Toledo and nearby communities have earned the dubious distinction of being the first to report outbreaks of human illness due to algae toxins in municipal drinking water, according to a report published Thursday by the Centers for Disease Control and Prevention. Both areas take their drinking water from Lake Erie. Blue-green algae are common there and in many other in freshwater lakes, were they can multiply in the heat of summer and produce toxins, according to the Environmental Protection Agency. (Jochem, 11/9)

Los Angeles Times: San Diego's Big Hospitals Plan A Push Into Medical Tourism Planning a visit to San Diego? Hit the beaches. Check. Spend a day at the zoo or a theme park. Check. Sample craft beer. Check. Book a stay at a local hospital for cutting-edge cardiac or cancer treatment? For decades, San Diego has traded on its

cutting-edge cardiac or cancer treatment? For decades, San Diego has traded on its reputation for year-round sun, a captivating coastline and family-friendly attractions to woo tourists. But enticing visitors with the promise of lifesaving treatments by acclaimed physicians and hospitals has never been offered up as a selling point. Until now. (Weisberg, 11/9)

The Wall Street Journal: Outcome Health's Investors Receive Subpoenas From Justice Department

Investors in Outcome Health on Thursday said in a court filing that they were receiving subpoenas from the Justice Department as part of a fraud investigation into the prominent Chicago advertising startup. The filing, submitted to the New York State Supreme Court in New York County, said Goldman Sachs Group Inc. and other investors, which are suing Outcome for allegedly defrauding them, were receiving the



subpoenas on Thursday. The investors also said "additional inquiries" were expected from the Securities and Exchange Commission, without elaborating. (Winkler, 11/9)

The Associated Press: Feds Backing Out Of Lawsuit Against Nursing Chain

The federal government is moving to dismiss a lawsuit it brought two years ago against a national nursing-care provider after a judge tossed out the government's key witness over issues of credibility. The Justice Department joined in on a whistleblower lawsuit against Toledo, Ohio-based HCR ManorCare, which operates more than 250 skilled nursing facilities nationwide. Authorities say the chain fraudulently overbilled Medicare for millions of dollars. (Barakat, 11/9)

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Sender:	Kaiser Health News <emails@kaiserhealthnews.org></emails@kaiserhealthnews.org>
Recipient:	Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent Date:	2017/11/10 06:35:27
Delivered Date:	2017/11/10 06:36:38



From:	Wasserman, Jill (OS/OPHS)
То:	Broido, Tara (HHS/OASH)
CC:	Greene, Nicole (OS/OASH) ; Leggin, Brooke (HHS/OWH) ; Bishop-Crawford, Jennifer (OS/OASH)
Subject:	RE: POLITICO - changes to Office of Women's Health website
Date:	2018/03/21 13:09:08
Priority:	Normal
Туре:	Note

Will you call me, please? (b)(6) Thanks -Jill

From: Broido, Tara (HHS/OASH)

Sent: Wednesday, March 21, 2018 12:59 PM

To: Wasserman, Jill (OS/OPHS)

Cc: Greene, Nicole (OS/OASH); Leggin, Brooke (HHS/OWH); Bishop-Crawford, Jennifer (OS/OASH)

Subject: Re: POLITICO - changes to Office of Women's Health website

Is that when you changed the terminology?

On: 21 March 2018 12:56, "Wasserman, Jill (OS/OPHS)" < <u>Jill.Wasserman1@hhs.gov</u>>wrote: Does that answer your question?

The https://womenshealth.gov website was made mobile-ready over several months, beginning in June of 2016 with our most popular fact sheet, Polycystic ovary syndrome. While we continue to bring the last remaining pages into a mobile-ready format, the vast majority of the site was mobile-ready on October 26, 2017 with the launching of new top-level navigation and a new "fat footer." As part of this process, the outdated "Lesbian and bisexual women's health" fact sheet was removed on September 28, 2017. Health content on https://womenshealth.gov is constantly updated as new health information is available and also on a regular 18-month editorial calendar. Beginning in 2016, OWH started incorporating health information about lesbian and bisexual women into health topics, incorporating data about how website users search for health information online.

From: Broido, Tara (HHS/OASH)

Sent: Wednesday, March 21, 2018 12:51 PM

To: Wasserman, Jill (OS/OPHS)

Cc: Greene, Nicole (OS/OASH); Leggin, Brooke (HHS/OWH); Bishop-Crawford, Jennifer (OS/OASH)

Subject: Re: POLITICO - changes to Office of Women's Health website



On: 21 March 2018 12:47, "Wasserman, Jill (OS/OPHS)" < Jill.Wasserman1@hhs.gov > wrote: While the terms "lesbian" and "bisexual" are used on the Womenshealth.gov website as necessary, we have updated our health information to focus on the terms "women who have sex with women" and "same-sex relationships" also.

Here's the why behind this:

HHS OWH uses best practices to provide information on how people seek it, and in doing so, we aim to meet the needs of all women on the <u>Womenshealth.gov</u> website.

Through our work with subject matter experts, we removed the emphasis on labels to support research findings that many women who identify as lesbian have both male and female sex partners, as do many women who identify as heterosexual. Womenshealth.gov site focuses on health and health behaviors. Thus, the use of "women who have sex with women" was preferred when referring to conditions or diseases that affect women who have sex with women, such as certain sexually transmitted infections that can be shared between women. In the same vein, "same-sex relationships" was used when referencing CDC data on domestic violence, for example.

From: Broido, Tara (HHS/OASH)

Sent: Wednesday, March 21, 2018 12:34 PM

To: Bishop-Crawford, Jennifer (OS/OASH); Wasserman, Jill (OS/OPHS)

Cc: Greene, Nicole (OS/OASH); Leggin, Brooke (HHS/OWH)

Subject: Re: POLITICO - changes to Office of Women's Health website

We got a call from the Hill with the same request. I am responding and including more background.

On: 21 March 2018 09:54, "Broido, Tara (HHS/OASH)" < Tara. Broido@hhs.gov > wrote:

Feel free to send counter points to me if you would like. Let's see if this generates any additional inquiries.

On: 21 March 2018 09:51, "Bishop-Crawford, Jennifer (OS/OASH)" < <u>Jennifer.Bishop-Crawford@hhs.gov</u>>wrote:

Sorry to be late to this game I had some computer problems. This is such farce. Let us know if you need anything.

Jenn

From: Broido, Tara (HHS/OASH)

Sent: Wednesday, March 21, 2018 9:34 AM

To: Wasserman, Jill (OS/OPHS)



Cc: Bishop-Crawford, Jennifer (OS/OASH); Greene, Nicole (OS/OASH); Leggin, Brooke (HHS/OWH) **Subject:** Re: POLITICO - changes to Office of Women's Health website

It will probably come off subscription at 10:30 when Pulse comes out. I went ahead and sent the information about this all starting in 2016.

On: 21 March 2018 09:29, "Wasserman, Jill (OS/OPHS)" < <u>Jill.Wasserman1@hhs.gov</u>>wrote: Let me check. Stay tuned.

Also, did you see the article? I was searching for it this morning, but couldn't find it. Ann sent it to me...if you click on the link below, I still can't see it; looks like you need a subscription?!

HHS strips lesbian, bisexual health content from women's health website

By Dan Diamond

03/21/2018 08:32 AM EDT

Multiple LGBT health resources were removed from a popular HHS website last fall, a new report finds. A webpage devoted to lesbian and bisexual health, links to LGBT topics and other references were removed between September and October 2017 from WomensHealth.gov, a website maintained by HHS' Office on Women's Health. The removals were tracked in a <u>pair</u> of <u>reports</u> by the Sunlight Foundation's Web Integrity Project and shared with POLITICO.

HHS said the pages and links, some of which were first posted in 2012, were taken down as part of a routine update. "The outdated lesbian and bisexual health pages were removed and the health content was integrated into the relevant health topics pages across the website," an HHS spokesperson said. However, the Sunlight Foundation determined that existing health topic pages do not appear to have been updated with new material and the now-missing lesbian and bisexual health content was not integrated elsewhere. For instance, HHS removed a page that raises multiple LGBT-specific questions — such as "What are important health issues that lesbians and bisexual women should discuss with their health care professionals?" — that are not explicitly addressed elsewhere across the website. "Bisexual and lesbian health" was also removed from the website's listing of more than 100 different health care topics, which still includes other population-specific topics like "breastfeeding information for African-American communities."

A lesbian and bisexual health fact sheet also was removed from its web address. Sunlight Foundation researchers say the fact sheet was quietly moved to a different location in the website's archives and "placed on an island." No links currently direct to it.

The office's Twitter account, <u>@womenshealth</u>, which has nearly 1 million followers, also has not mentioned LGBT health issues since a post on Nov. 11, 2016.

The Sunlight Foundation's Andrew Bergman, who helped lead the study, said that the group has identified similar removals on other HHS webpages, but the changes at the women's health website stand out. "We've seen nothing this targeted at one HHS site," Bergman said. "The removal of lesbian and bisexual health materials in particular, without advance notice and in a targeted way, raise concerns that they've targeted information for vulnerable populations."

HHS has faced questions about its broader approach to LGBT health. POLITICO in February <u>detailed</u> how the agency has taken steps to dismantle LGBT health initiatives, stripped LGBT-friendly language from documents and reassigned the senior adviser dedicated to LGBT health.

WomensHealth.gov is among the health department's more-trafficked websites. The website received about 700,000 visits over the past month, ahead of sites like Medicaid.gov and FoodSafety.gov.



The website is managed by Hager Sharp, a communications firm, which has been under contract since 2012. But HHS, not the outside communications firm, determines the content. Hager Sharp referred questions to HHS.

The women's health office also saw a personnel shake-up late last year. Suzanne Haynes, who had been a senior science adviser at HHS and the former president of the Lesbian Health Fund, oversaw the office's LGBT health research. Haynes, who retired from HHS in December, declined comment. *To view online*:

https://www.politicopro.com/health-care/article/2018/03/hhs-strips-lesbian-bisexual-health-content-from-womens-health-website-430123

From: Broido, Tara (HHS/OASH)

Sent: Wednesday, March 21, 2018 9:26 AM

To: Wasserman, Jill (OS/OPHS)

Cc: Bishop-Crawford, Jennifer (OS/OASH); Greene, Nicole (OS/OASH); Leggin, Brooke (HHS/OWH)

Subject: Re: POLITICO - changes to Office of Women's Health website

Thanks! For this part: also think this is really important to emphasize: While the terms "lesbian" and "bisexual" are used on the <u>Womenshealth.gov</u> website as necessary, we have updated our health information to focus on the terms "women who have sex with women" and "same-sex relationships" also.

Can you provide a why? Because data show that is how people search or is it to be more inclusive or something else?

On: 21 March 2018 09:13, "Wasserman, Jill (OS/OPHS)" < <u>Jill.Wasserman1@hhs.gov</u>>wrote: Tara –

Brooke provided this yesterday which has other examples:

The https://womenshealth.gov website was made mobile-ready over several months, beginning in June of 2016 with our most popular fact sheet, Polycystic ovary syndrome. While we continue to bring the last remaining pages into a mobile-ready format, the vast majority of the site was mobile-ready on October 26, 2017 with the launching of new top-level navigation and a new "fat footer." As part of this process, the outdated "Lesbian and bisexual women's health" fact sheet was removed on September 28, 2017. Health content on https://womenshealth.gov is constantly updated as new health information is available and also on a regular 18-month editorial calendar. Beginning in 2016, OWH started incorporating health information about lesbian and bisexual women into health topics, incorporating data about how website users search for health information online.

While the terms "lesbian" and "bisexual" are used on the Womenshealth.gov website as necessary, we have updated our health information to focus on the terms "women who have sex with women" and "same-sex relationships" also. Website users can find information for women who have sex with women throughout the website and under several health topics. For example, the question "Can women who have sex with women get [chlamydia, gonorrhea, etc.]?" is featured in all of our sexually transmitted infection fact sheets. Women who have sex with women are included on the "Women and HIV" page at



https://www.womenshealth.gov/hiv-and-aids/women-and-hiv/. Same-sex relationships are included throughout our domestic violence information. For example, we have the question "What are signs of domestic violence or abuse in same-sex relationships?" on the page at

https://www.womenshealth.gov/relationships-and-safety/domestic-violence/signs-domestic-violence in the Relationships and Safety section. We also have the question "How are gender and sexual minority women affected by domestic violence?" on this same page at

https://www.womenshealth.gov/relationships-and-safety/domestic-violence/signs-domestic-violence. On the page about sexual assault on college campuses we state "Women who identify as lesbian, bisexual, or gay are more likely to experience sexual assault on college campuses than heterosexual women." in the first question and answer section at https://www.womenshealth.gov/relationships-and-safety/sexual-assault-and-rape/college-sexual-assault.

Will that suffice?

I also think this is really important to emphasize: While the terms "lesbian" and "bisexual" are used on the Womenshealth.gov website as necessary, we have updated our health information to focus on the terms "women who have sex with women" and "same-sex relationships" also.

Jill

From: Broido, Tara (HHS/OASH)

Sent: Wednesday, March 21, 2018 9:03 AM

To: Bishop-Crawford, Jennifer (OS/OASH); Wasserman, Jill (OS/OPHS); Greene, Nicole (OS/OASH);

Leggin, Brooke (HHS/OWH)

Subject: Fwd: POLITICO - changes to Office of Women's Health website

See below, are there any other examples?

From: "Dan Diamond"

⟨b)(6)

@politico.com>

Subject: Re: POLITICO - changes to Office of Women's Health website

Date: 21 March 2018 08:10

To: "Broido, Tara (HHS/OASH)" < Tara. Broido@hhs.gov>

Thanks, Tara.

Did want to give you a heads-up that we will move a story here this morning. Went back to the transparency group, they pointed out that health topic pages (like chylamdia) didn't appear to have changed since the lesbian and bisexual health pages were taken down, among other arguments. But HHS response will be high in the story.

On Mar 20, 2018, at 6:04 PM, Broido, Tara (HHS/OASH) <Tara.Broido@hhs.gov>wrote:

Hi Dan,

I went back to my OWH career colleagues and they confirmed.



Here is a statement for attribution to an HHS spokesperson:

The Office on Women's Health strives to provide the most accurate health information on the womenshealth.gov website. As OWH updates its site, the outdated lesbian and bisexual health pages were removed and the health content was integrated into the relevant health topics pages across the website. This aligns with how people search for content. You can now find lesbian and bisexual health content by searching for relevant health topics on

the <u>womenshealth.gov</u> website. For example, on the Chlamydia page (https://www.womenshealth.gov/a-z-topics/chlamydia) the content includes "Can women who have sex with women get chlamydia?"

On background:

To further illustrate the point about how people search for information today, there is no longer any population specific pages. For example, African American women don't type in "African American and Fibroids" when they visit womenshealth.gov they search for Fibroids.

As you know we typically do not comment on personnel matters, however, on background we note that Suzanne Haynes voluntarily retired from her position.

Thanks, Tara

On: 20 March 2018 15:02, "Dan Diamond" < (b)(6) @politico.com > wrote:

I'm looking into the reason behind multiple, targeted changes to <u>WomensHealth.gov</u>, all made in the past year, that reduced access to LGBT resources and information.

For instance, the "lesbian and bisexual health" page appears to be totally missing from the website.

https://web.archive.org/web/20170919061935/https://www.womenshealth.gov/a-z-topics/lesbian-and-bisexual-health

Similarly, a fact sheet on lesbian and bisexual health issues also is missing. https://web.archive.org/web/20170513040554/https://www.womenshealth.gov/publications/our-publications/fact-sheet/lesbian-bisexual-health.html

The terms "Bisexual and lesbian health" and "lesbian and bisexual health" were removed from an A-Z listing.

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My questions:

· Why were these pages taken down and the resources removed? Who made the decision to do so?



- \cdot Is the Office on Women's Health still committed to sharing information about LGBT health care issues?
- \cdot Researcher Suzanne Haynes, who oversaw much of this work, left HHS in December 2017. Was her departure linked to these changes to the website?

My deadline is 8 pm this evening. Feel free to reach me by phone if that's easier.

Thanks

- DD

202-374-840

Sender:	Wasserman, Jill (OS/OPHS)
Recipient:	Broido, Tara (HHS/OASH) ; Greene, Nicole (OS/OASH) ; Leggin, Brooke (HHS/OWH) ; Bishop-Crawford, Jennifer (OS/OASH)
Sent Date:	2018/03/21 13:09:07
Delivered Date:	2018/03/21 13:09:08



From:	Wasserman, Jill (OS/OPHS)
То:	Bishop-Crawford, Jennifer (OS/OASH) ; Broido, Tara (HHS/OASH)
CC:	Greene, Nicole (OS/OASH) ; Leggin, Brooke (HHS/OWH)
Subject:	RE: POLITICO - changes to Office of Women's Health website
Date:	2018/03/21 13:57:56
Priority:	Normal
Type:	Note

Hi All -

I spoke to Tara, and this loop has been closed.

We never changed the terminology—just started incorporating "women who have sex with women" terminology to be more inclusive.

Jill

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Wednesday, March 21, 2018 1:35 PM

To: Broido, Tara (HHS/OASH); Wasserman, Jill (OS/OPHS) **Cc:** Greene, Nicole (OS/OASH); Leggin, Brooke (HHS/OWH)

Subject: RE: POLITICO - changes to Office of Women's Health website

So I've been searching my laptop and the site, and in 2016, we were still using Lesbian and Bisexual, if only in a blog in September. I'm trying to check our web meeting notes to determine the specific date the decision was made. This may take a little time. But I can say that its really took effect in 2017

From: Broido, Tara (HHS/OASH)

Sent: Wednesday, March 21, 2018 12:59 PM

To: Wasserman, Jill (OS/OPHS)

Cc: Greene, Nicole (OS/OASH); Leggin, Brooke (HHS/OWH); Bishop-Crawford, Jennifer (OS/OASH)

Subject: Re: POLITICO - changes to Office of Women's Health website

Is that when you changed the terminology?

On: 21 March 2018 12:56, "Wasserman, Jill (OS/OPHS)" < <u>Jill.Wasserman1@hhs.gov</u>>wrote: Does that answer your question?



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Sent: Wednesday, March 21, 2018 12:51 PM

To: Wasserman, Jill (OS/OPHS)

Cc: Greene, Nicole (OS/OASH); Leggin, Brooke (HHS/OWH); Bishop-Crawford, Jennifer (OS/OASH)

Subject: Re: POLITICO - changes to Office of Women's Health website

And when was this decision made?

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HHS strips lesbian, bisexual health content from women's health website

By Dan Diamond

03/21/2018 08:32 AM EDT

Multiple LGBT health resources were removed from a popular HHS website last fall, a new report finds. A webpage devoted to lesbian and bisexual health, links to LGBT topics and other references were removed between September and October 2017 from WomensHealth.gov, a website maintained by HHS' Office on Women's Health. The removals were tracked in a <u>pair</u> of <u>reports</u> by the Sunlight Foundation's Web Integrity Project and shared with POLITICO.

HHS said the pages and links, some of which were first posted in 2012, were taken down as part of a routine update. "The outdated lesbian and bisexual health pages were removed and the health content was integrated into the relevant health topics pages across the website," an HHS spokesperson said. However, the Sunlight Foundation determined that existing health topic pages do not appear to have been updated with new material and the now-missing lesbian and bisexual health content was not integrated elsewhere. For instance, HHS removed a page that raises multiple LGBT-specific questions — such as "What are important health issues that lesbians and bisexual women should discuss with their health care professionals?" — that are not explicitly addressed elsewhere across the website. "Bisexual and lesbian health" was also removed from the website's listing of more than 100 different health care



topics, which still includes other population-specific topics like "breastfeeding information for African-American communities."

A lesbian and bisexual health fact sheet also was removed from its web address. Sunlight Foundation researchers say the fact sheet was quietly moved to a different location in the website's archives and "placed on an island." No links currently direct to it.

The office's Twitter account, <u>@womenshealth</u>, which has nearly 1 million followers, also has not mentioned LGBT health issues since a <u>post</u> on Nov. 11, 2016.

The Sunlight Foundation's Andrew Bergman, who helped lead the study, said that the group has identified similar removals on other HHS webpages, but the changes at the women's health website stand out. "We've seen nothing this targeted at one HHS site," Bergman said. "The removal of lesbian and bisexual health materials in particular, without advance notice and in a targeted way, raise concerns that they've targeted information for vulnerable populations."

HHS has faced questions about its broader approach to LGBT health. POLITICO in February <u>detailed</u> how the agency has taken steps to dismantle LGBT health initiatives, stripped LGBT-friendly language from documents and reassigned the senior adviser dedicated to LGBT health.

WomensHealth.gov is among the health department's more-trafficked websites. The website received about 700,000 visits over the past month, ahead of sites like Medicaid.gov and FoodSafety.gov. The website is managed by Hager Sharp, a communications firm, which has been under contract since 2012. But HHS, not the outside communications firm, determines the content. Hager Sharp referred questions to HHS.

The women's health office also saw a personnel shake-up late last year. Suzanne Haynes, who had been a senior science adviser at HHS and the former president of the Lesbian Health Fund, oversaw the office's LGBT health research. Haynes, who retired from HHS in December, declined comment. *To view online*:

https://www.politicopro.com/health-care/article/2018/03/hhs-strips-lesbian-bisexual-health-content-from-womens-health-website-430123

From: Broido, Tara (HHS/OASH)

Sent: Wednesday, March 21, 2018 9:26 AM

To: Wasserman, Jill (OS/OPHS)

Cc: Bishop-Crawford, Jennifer (OS/OASH); Greene, Nicole (OS/OASH); Leggin, Brooke (HHS/OWH)

Subject: Re: POLITICO - changes to Office of Women's Health website

Thanks! For this part: also think this is really important to emphasize: While the terms "lesbian" and "bisexual" are used on the <u>Womenshealth.gov</u> website as necessary, we have updated our health information to focus on the terms "women who have sex with women" and "same-sex relationships" also.

Can you provide a why? Because data show that is how people search or is it to be more inclusive or something else?

On: 21 March 2018 09:13, "Wasserman, Jill (OS/OPHS)" < <u>Jill.Wasserman1@hhs.gov</u>>wrote: Tara –

Brooke provided this yesterday which has other examples:



The https://womenshealth.gov website was made mobile-ready over several months, beginning in June of 2016 with our most popular fact sheet, Polycystic ovary syndrome. While we continue to bring the last remaining pages into a mobile-ready format, the vast majority of the site was mobile-ready on October 26, 2017 with the launching of new top-level navigation and a new "fat footer." As part of this process, the outdated "Lesbian and bisexual women's health" fact sheet was removed on September 28, 2017. Health content on https://womenshealth.gov is constantly updated as new health information is available and also on a regular 18-month editorial calendar. Beginning in 2016, OWH started incorporating health information about lesbian and bisexual women into health topics, incorporating data about how website users search for health information online.

While the terms "lesbian" and "bisexual" are used on the Womenshealth.gov website as necessary, we have updated our health information to focus on the terms "women who have sex with women" and "same-sex relationships" also. Website users can find information for women who have sex with women throughout the website and under several health topics. For example, the question "Can women who have sex with women get [chlamydia, gonorrhea, etc.]?" is featured in all of our sexually transmitted infection fact sheets. Women who have sex with women are included on the "Women and HIV" page at https://www.womenshealth.gov/hiv-and-aids/women-and-hiv/. Same-sex relationships are included throughout our domestic violence information. For example, we have the question "What are signs of domestic violence or abuse in same-sex relationships?" on the page at

https://www.womenshealth.gov/relationships-and-safety/domestic-violence/signs-domestic-violence in the Relationships and Safety section. We also have the question "How are gender and sexual minority women affected by domestic violence?" on this same page at

https://www.womenshealth.gov/relationships-and-safety/domestic-violence/signs-domestic-violence. On the page about sexual assault on college campuses we state "Women who identify as lesbian, bisexual, or gay are more likely to experience sexual assault on college campuses than heterosexual women." in the first question and answer section at https://www.womenshealth.gov/relationships-and-safety/sexual-assault-and-rape/college-sexual-assault.

Will that suffice?

I also think this is really important to emphasize: While the terms "lesbian" and "bisexual" are used on the Womenshealth.gov website as necessary, we have updated our health information to focus on the terms "women who have sex with women" and "same-sex relationships" also.

Jill

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Sent: Wednesday, March 21, 2018 9:03 AM

To: Bishop-Crawford, Jennifer (OS/OASH); Wasserman, Jill (OS/OPHS); Greene, Nicole (OS/OASH);

Leggin, Brooke (HHS/OWH)

Subject: Fwd: POLITICO - changes to Office of Women's Health website

See below, are there any other examples?

From: "Dan Diamond"

⟨(b)(6) @politico.com⟩

Subject: Re: POLITICO - changes to Office of Women's Health website



Date: 21 March 2018 08:10

To: "Broido, Tara (HHS/OASH)" < Tara.Broido@hhs.gov>

Thanks, Tara.

Did want to give you a heads-up that we will move a story here this morning. Went back to the transparency group, they pointed out that health topic pages (like chylamdia) didn't appear to have changed since the lesbian and bisexual health pages were taken down, among other arguments. But HHS response will be high in the story.

On Mar 20, 2018, at 6:04 PM, Broido, Tara (HHS/OASH) < Tara. Broido@hhs.gov > wrote:

Hi Dan,

I went back to my OWH career colleagues and they confirmed.

Here is a statement for attribution to an HHS spokesperson:

The Office on Women's Health strives to provide the most accurate health information on the womenshealth.gov website. As OWH updates its site, the outdated lesbian and bisexual health pages were removed and the health content was integrated into the relevant health topics pages across the website. This aligns with how people search for content. You can now find lesbian and bisexual health content by searching for relevant health topics on the womenshealth.gov website. For example, on the Chlamydia page (https://www.womenshealth.gov/a-z-topics/chlamydia) the content includes "Can women who have sex with women get chlamydia?"

On background:

To further illustrate the point about how people search for information today, there is no longer any population specific pages. For example, African American women don't type in "African American and Fibroids" when they visit womenshealth.gov they search for Fibroids.

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The terms "Bisexual and lesbian health" and "lesbian and bisexual health" were removed from an A-Z listing.

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My questions:

- \cdot Why were these pages taken down and the resources removed? Who made the decision to do so?
- · Is the Office on Women's Health still committed to sharing information about LGBT health care issues?
- \cdot Researcher Suzanne Haynes, who oversaw much of this work, left HHS in December 2017. Was her departure linked to these changes to the website?

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202-374-840

Sender:	Wasserman, Jill (OS/OPHS)
Recipient:	Bishop-Crawford, Jennifer (OS/OASH) ; Broido, Tara (HHS/OASH) ; Greene, Nicole (OS/OASH) ; Leggin, Brooke (HHS/OWH)
Sent Date:	2018/03/21 13:57:55
Delivered Date:	2018/03/21 13:57:56



	Broido, Tara (HHS/OASH)
То:	Bishop-Crawford, Jennifer (OS/OASH) ; Wasserman, Jill (OS/OPHS)
CC:	Greene, Nicole (OS/OASH) ; Leggin, Brooke (HHS/OWH)
Subject:	Re: POLITICO - changes to Office of Women's Health website
Date:	2018/03/21 13:59:05
Priority:	Normal
Туре:	Note

Thanks! I sent a response to the Hill so I think we are good for now.

On: 21 March 2018 13:35, "Bishop-Crawford, Jennifer (OS/OASH)" < <u>Jennifer.Bishop-Crawford@hhs.gov</u>>wrote:

So I've been searching my laptop and the site, and in 2016, we were still using Lesbian and Bisexual, if only in a blog in September. I'm trying to check our web meeting notes to determine the specific date the decision was made. This may take a little time. But I can say that its really took effect in 2017

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While the terms "lesbian" and "bisexual" are used on the Womenshealth.gov website as necessary, we have updated our health information to focus on the terms "women who have sex with women" and "same-sex relationships" also. Website users can find information for women who have sex with women throughout the website and under several health topics. For example, the question "Can women who have sex with women get [chlamydia, gonorrhea, etc.]?" is featured in all of our sexually transmitted infection fact sheets. Women who have sex with women are included on the "Women and HIV" page at https://www.womenshealth.gov/hiv-and-aids/women-and-hiv/. Same-sex relationships are included throughout our domestic violence information. For example, we have the question "What are signs of domestic violence or abuse in same-sex relationships?" on the page at https://www.womenshealth.gov/relationships-and-safety/domestic-violence/signs-domesticviolence in the Relationships and Safety section. We also have the question "How are gender and sexual minority women affected by domestic violence?" on this same page at https://www.womenshealth.gov/relationships-and-safety/domestic-violence/signs-domesticviolence. On the page about sexual assault on college campuses we state "Women who identify as lesbian, bisexual, or gay are more likely to experience sexual assault on college campuses than heterosexual women." in the first question and answer section at https://www.womenshealth.gov/relationships-and-safety/sexual-assault-and-rape/collegesexual-assault.

Will that suffice?

I also think this is really important to emphasize: While the terms "lesbian" and "bisexual" are used on the Womenshealth.gov website as necessary, we have updated our health information to focus on the terms "women who have sex with women" and "same-sex relationships" also.

Jill

From: Broido, Tara (HHS/OASH)

Sent: Wednesday, March 21, 2018 9:03 AM



To: Bishop-Crawford, Jennifer (OS/OASH); Wasserman, Jill (OS/OPHS); Greene, Nicole

(OS/OASH); Leggin, Brooke (HHS/OWH)

Subject: Fwd: POLITICO - changes to Office of Women's Health website

See below, are there any other examples?

From: "Dan Diamond" < (b)(6) @politico.com>

Subject: Re: POLITICO - changes to Office of Women's Health website

Date: 21 March 2018 08:10

To: "Broido, Tara (HHS/OASH)" < Tara. Broido@hhs.gov>

Thanks, Tara.

Did want to give you a heads-up that we will move a story here this morning. Went back to the transparency group, they pointed out that health topic pages (like chylamdia) didn't appear to have changed since the lesbian and bisexual health pages were taken down, among other arguments. But HHS response will be high in the story.

On Mar 20, 2018, at 6:04 PM, Broido, Tara (HHS/OASH) < Tara.Broido@hhs.gov > wrote:

Hi Dan,

I went back to my OWH career colleagues and they confirmed.

Here is a statement for attribution to an HHS spokesperson:
The Office on Women's Health strives to provide the most accurate health information on the www.womenshealth.gov website. As OWH updates its site, the outdated lesbian and bisexual health pages were removed and the health content was integrated into the relevant health topics pages across the website. This aligns with how people search for content. You can now find lesbian and bisexual health content by searching for relevant health topics on the www.womenshealth.gov website. For example, on the Chlamydia page (https://www.womenshealth.gov/a-z-topics/chlamydia) the content

includes "Can women who have sex with women get chlamydia?"

On background:

To further illustrate the point about how people search for information today, there is no longer any population specific pages. For example, African American women don't type in "African American and Fibroids" when they visit womenshealth.gov they search for Fibroids.



As you know we typically do not comment on personnel matters, however, on background we note that Suzanne Haynes voluntarily retired from her position.

Thanks, Tara

On: 20 March 2018 15:02, "Dan Diamond"

Hi Tara -

I'm looking into the reason behind multiple, targeted changes to <u>WomensHealth.gov</u>, all made in the past year, that reduced access to LGBT resources and information.

For instance, the "lesbian and bisexual health" page appears to be totally missing from the website.

https://web.archive.org/web/20170919061935/https://www.womenshealth.gov/a-z-topics/lesbian-and-bisexual-health

Similarly, a fact sheet on lesbian and bisexual health issues also is missing. https://www.womenshealth.gov/publications/our-publications/fact-sheet/lesbian-bisexual-health.html

The terms "Bisexual and lesbian health" and "lesbian and bisexual health" were removed from an A-Z listing.

https://www.womenshealth.gov/a-z-topics/

My questions:

- · Why were these pages taken down and the resources removed? Who made the decision to do so?
- · Is the Office on Women's Health still committed to sharing information about LGBT health care issues?
- · Researcher Suzanne Haynes, who oversaw much of this work, left HHS in December 2017. Was her departure linked to these changes to the website?

My deadline is 8 pm this evening. Feel free to reach me by phone if that's easier.

Thanks

- DD

202-374-840

Broido, Tara (HHS/OASH) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP

Sender: (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=2C3CD5C5AFE049B6A8B48C25324C7465-BROIDO, TAR>



Bishop-Crawford, Jennifer (OS/OASH) ; Wasserman, Jill (OS/OPHS) ; Greene, Nicole (OS/OASH) ; Leggin, Brooke (HHS/OWH)
2018/03/21 13:59:04
2018/03/21 13:59:05



From:	Greene, Nicole (OS/OASH)
To:	Broido, Tara (HHS/OASH) ; Bishop-Crawford, Jennifer (OS/OASH) ; Wasserman, Jill (OS/OPHS)
CC:	Leggin, Brooke (HHS/OWH)
Subject:	RE: POLITICO - changes to Office of Women's Health website
Date:	2018/03/21 12:35:00
Priority:	Normal
Туре:	Note
Туре:	Note

Thanks for keeping us updated. Please let us know what other information or assistance you may need.

Nicole Greene Acting Director Deputy Director



OWH_logo_150

Office on Women's Health
Office of the Assistant Secretary for Health

Office of the Secretary
U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Nicole.Greene@hhs.gov

Main: 202-690-7650 | Direct: 202-205-2614

From: Broido, Tara (HHS/OASH)

Sent: Wednesday, March 21, 2018 12:34 PM

To: Bishop-Crawford, Jennifer (OS/OASH) < Jennifer.Bishop-Crawford@hhs.gov>; Wasserman, Jill

(OS/OPHS) < Jill. Wasserman1@hhs.gov>

Cc: Greene, Nicole (OS/OASH) < Nicole.Greene@hhs.gov>; Leggin, Brooke (HHS/OWH)

<Brooke.Leggin@hhs.gov>

Subject: Re: POLITICO - changes to Office of Women's Health website

We got a call from the Hill with the same request. I am responding and including more background.

On: 21 March 2018 09:54, "Broido, Tara (HHS/OASH)" < Tara.Broido@hhs.gov > wrote:



Feel free to send counter points to me if you would like. Let's see if this generates any additional inquiries.

On: 21 March 2018 09:51, "Bishop-Crawford, Jennifer (OS/OASH)" < <u>Jennifer.Bishop-Crawford@hhs.gov</u>>wrote:

Sorry to be late to this game I had some computer problems. This is such farce. Let us know if you need anything.

Jenn

From: Broido, Tara (HHS/OASH)

Sent: Wednesday, March 21, 2018 9:34 AM

To: Wasserman, Jill (OS/OPHS)

Cc: Bishop-Crawford, Jennifer (OS/OASH); Greene, Nicole (OS/OASH); Leggin, Brooke (HHS/OWH)

Subject: Re: POLITICO - changes to Office of Women's Health website

It will probably come off subscription at 10:30 when Pulse comes out. I went ahead and sent the information about this all starting in 2016.

On: 21 March 2018 09:29, "Wasserman, Jill (OS/OPHS)" < <u>Jill.Wasserman1@hhs.gov</u>>wrote: Let me check. Stay tuned.

Also, did you see the article? I was searching for it this morning, but couldn't find it. Ann sent it to me...if you click on the link below, I still can't see it; looks like you need a subscription?!

HHS strips lesbian, bisexual health content from women's health website

By Dan Diamond

03/21/2018 08:32 AM EDT

Multiple LGBT health resources were removed from a popular HHS website last fall, a new report finds. A webpage devoted to lesbian and bisexual health, links to LGBT topics and other references were removed between September and October 2017 from WomensHealth.gov, a website maintained by HHS' Office on Women's Health. The removals were tracked in a <u>pair</u> of <u>reports</u> by the Sunlight Foundation's Web Integrity Project and shared with POLITICO.

HHS said the pages and links, some of which were first posted in 2012, were taken down as part of a routine update. "The outdated lesbian and bisexual health pages were removed and the health content was integrated into the relevant health topics pages across the website," an HHS spokesperson said. However, the Sunlight Foundation determined that existing health topic pages do not appear to have been updated with new material and the now-missing lesbian and bisexual health content was not integrated elsewhere. For instance, HHS removed a page that raises multiple LGBT-specific questions — such as "What are important health issues that lesbians and bisexual women should discuss with their health care professionals?" — that are not explicitly addressed elsewhere across the website. "Bisexual and lesbian health" was also removed from the website's listing of more than 100 different health care topics, which still includes other population-specific topics like "breastfeeding information for African-American communities."



A lesbian and bisexual health fact sheet also was removed from its web address. Sunlight Foundation researchers say the fact sheet was quietly moved to a different location in the website's archives and "placed on an island." No links currently direct to it.

The office's Twitter account, <u>@womenshealth</u>, which has nearly 1 million followers, also has not mentioned LGBT health issues since a post on Nov. 11, 2016.

The Sunlight Foundation's Andrew Bergman, who helped lead the study, said that the group has identified similar removals on other HHS webpages, but the changes at the women's health website stand out. "We've seen nothing this targeted at one HHS site," Bergman said. "The removal of lesbian and bisexual health materials in particular, without advance notice and in a targeted way, raise concerns that they've targeted information for vulnerable populations."

HHS has faced questions about its broader approach to LGBT health. POLITICO in February <u>detailed</u> how the agency has taken steps to dismantle LGBT health initiatives, stripped LGBT-friendly language from documents and reassigned the senior adviser dedicated to LGBT health.

WomensHealth.gov is among the health department's more-trafficked websites. The website received about 700,000 visits over the past month, ahead of sites like Medicaid.gov and FoodSafety.gov. The website is managed by Hager Sharp, a communications firm, which has been under contract since 2012. But HHS, not the outside communications firm, determines the content. Hager Sharp referred

The women's health office also saw a personnel shake-up late last year. Suzanne Haynes, who had been a senior science adviser at HHS and the former president of the Lesbian Health Fund, oversaw the office's LGBT health research. Haynes, who retired from HHS in December, declined comment. *To view online*:

https://www.politicopro.com/health-care/article/2018/03/hhs-strips-lesbian-bisexual-health-content-from-womens-health-website-430123

From: Broido, Tara (HHS/OASH)

questions to HHS.

Sent: Wednesday, March 21, 2018 9:26 AM

To: Wasserman, Jill (OS/OPHS)

Cc: Bishop-Crawford, Jennifer (OS/OASH); Greene, Nicole (OS/OASH); Leggin, Brooke (HHS/OWH)

Subject: Re: POLITICO - changes to Office of Women's Health website

Thanks! For this part: also think this is really important to emphasize: While the terms "lesbian" and "bisexual" are used on the <u>Womenshealth.gov</u> website as necessary, we have updated our health information to focus on the terms "women who have sex with women" and "same-sex relationships" also.

Can you provide a why? Because data show that is how people search or is it to be more inclusive or something else?

On: 21 March 2018 09:13, "Wasserman, Jill (OS/OPHS)" < <u>Jill.Wasserman1@hhs.gov</u>>wrote: Tara –

Brooke provided this yesterday which has other examples:



The https://womenshealth.gov website was made mobile-ready over several months, beginning in June of 2016 with our most popular fact sheet, Polycystic ovary syndrome. While we continue to bring the last remaining pages into a mobile-ready format, the vast majority of the site was mobile-ready on October 26, 2017 with the launching of new top-level navigation and a new "fat footer." As part of this process, the outdated "Lesbian and bisexual women's health" fact sheet was removed on September 28, 2017. Health content on https://womenshealth.gov is constantly updated as new health information is available and also on a regular 18-month editorial calendar. Beginning in 2016, OWH started incorporating health information about lesbian and bisexual women into health topics, incorporating data about how website users search for health information online.

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women." in the first question and answer section at https://www.womenshealth.gov/relationships-and-

Jill

From: Broido, Tara (HHS/OASH)

Sent: Wednesday, March 21, 2018 9:03 AM

safety/sexual-assault-and-rape/college-sexual-assault.

To: Bishop-Crawford, Jennifer (OS/OASH); Wasserman, Jill (OS/OPHS); Greene, Nicole (OS/OASH);

Leggin, Brooke (HHS/OWH)

Subject: Fwd: POLITICO - changes to Office of Women's Health website

See below, are there any other examples?

From: "Dan Diamond" (b)(6) @politico.com>

Subject: Re: POLITICO - changes to Office of Women's Health website



Date: 21 March 2018 08:10

To: "Broido, Tara (HHS/OASH)" < Tara.Broido@hhs.gov>

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On background:

To further illustrate the point about how people search for information today, there is no longer any population specific pages. For example, African American women don't type in "African American and Fibroids" when they visit womenshealth.gov they search for Fibroids.

As you know we typically do not comment on personnel matters, however, on background we note that Suzanne Haynes voluntarily retired from her position.

Thanks, Tara				
On: 20 M	Iarch 2018 15:02, "Dan Diam	ond" < (b)(6)	@politico.com>wrote:	_
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The terms "Bisexual and lesbian health" and "lesbian and bisexual health" were removed from an A-Z listing.

https://www.womenshealth.gov/a-z-topics/

My questions:

- \cdot Why were these pages taken down and the resources removed? Who made the decision to do so?
- · Is the Office on Women's Health still committed to sharing information about LGBT health care issues?
- · Researcher Suzanne Haynes, who oversaw much of this work, left HHS in December 2017. Was her departure linked to these changes to the website?

My deadline is 8 pm this evening. Feel free to reach me by phone if that's easier.

Thanks

- DD

202-374-840

Sender:	Greene, Nicole (OS/OASH)
Recipient:	Broido, Tara (HHS/OASH) ; Bishop-Crawford, Jennifer (OS/OASH) ; Wasserman, Jill (OS/OPHS) ; Leggin, Brooke (HHS/OWH)
Sent Date:	2018/03/21 12:35:16
Delivered Date:	2018/03/21 12:35:00



From:	Marshall, Candace (OS/OASH)		
To:	Polacek, Aaron (OS/OASH) ; Hurwitz, Emily (HHS/OASH) ; Douglas, Tracie (OS/OASH) (CTR) ; Phenix, Adrianne (HHS/OASH) ; Ceinos, Gustavo (OS/OASH) ; Leggin, Brooke (HHS/OWH) ; Perrotte, Brittany (HHS/OASH) ; Williams, Shalethia (OS/OASH) ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d62da2638cd245be93e91cb94bb19515-Perrotte, B>; Williams, Shalethia (OS/OASH)		
CC:	Bishop-Crawford, Jennifer (OS/OASH) ; Smith, Adrienne M. (OS/OASH) ; Collins Sharp, Beth (OS/OASH/OWH/DPI) ; Greene, Nicole (OS/OASH)		
Subject:	ct: Volunteering for OWH/FOH Red Dress Event		
Date:	2018/02/12 15:46:43		
Priority:	Normal		
Туре:	Note		

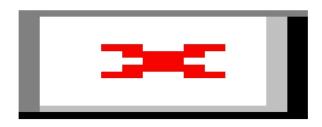
	Hi Everyone,
ł	Hi Everyone, (b)(5)

The Red Dress Fashion show and Exhibit will take place from 10:30 AM— 1:30 PM in the Great Hall. On the exhibit table, we will display OWH publications about heart health and healthy living as well as some information about the office. I've listed them here with a brief description.



- About Us- This one-pager provides an overview of the office and some of our work in women's
 health. I've attached this one so that you can review in advance. The work listed spans across
 divisions so some information may be less familiar.
- Make the Call- This is an OWH campaign to educate women about heart attacks, how to
 recognize the signs and get help. There isn't a fact sheet for Make the Call but we will have some
 of the graphics depicting the commons signs of heart attack for women. A nice this to share
 when passing this out is that the Make the Call information on our website has been updated
 and will be launched at the end of the week.
- OWH Facts sheets on Stroke (English &Spanish)
 This fact sheets provides basics on stroke, key symptoms and what to do if someone feels they are having a stroke.
- OWH Facts sheet on Heart Disease and Women- (English &Spanish)
 This fact sheet provides basic information on heart disease, symptoms in women and how it affects health conditions such as pregnancy and menopause.
- OWH Facts sheet on Heart-Healthy Eating (English & Spanish)
 This fact sheet provides information on what foods can help lower and increase the risk for heart disease and stroke.

As people are coming to the table, they may be interested in getting more information about women's health information that's not heart health related. No worries, we can handle that! Please direct them to the About Us fact sheet. On the bottom of Page 2, the address for our website is listed. One the homepage, people can sign up for regular women's health updates from the office. Also listed our social media channels that people can follow.





Please let me know if you have any questions. There is no special dress but since the event is about heart health, feel free to wear your red!

See you all tomorrow!! Thanks again!! Candace

Candace Marshall, MPH Health Communications Specialist



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

Email: Candace.Marshall@hhs.gov

Main: 202-690-7650 | Direct: 202-690-5414

S4	Marshall, Candace (OS/OASH)
Sender:	(FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=4FC8BD26D02246A09DA4FDA0B896D46F-MARSHALL, C>
Recipient:	Polacek, Aaron (OS/OASH) ; Hurwitz, Emily (HHS/OASH) ; Douglas, Tracie (OS/OASH) (CTR)
Sent Date: 2	2018/02/12 15:46:40
Delivered Date: 2	2018/02/12 15:46:43



Greene, Nicole (OS/OASH) From: (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=66BF54ED301743D0B71473B5B9F5 NIC>			
То:	Broido, Tara (HHS/OASH)		
Subject:	FW: POLITICO - changes to Office of Women's Health website		
Date:	2018/03/20 15:39:00		
Priority:	Urgent		
Туре:	Note		

Tara,

Please include me on emails like this in the future.

Thanks!

Nicole

Nicole Greene Acting Director Deputy Director



OWH_logo_150

Office on Women's Health
Office of the Assistant Secretary for Health
Office of the Secretary
U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Nicole.Greene@hhs.gov

Main: 202-690-7650 | Direct: 202-205-2614

Websites: www.girlshealth.gov | www.girlshealth.gov | <a href="www.girlsh

From: Bishop-Crawford, Jennifer (OS/OASH) Sent: Tuesday, March 20, 2018 3:35 PM

To: Greene, Nicole (OS/OASH) < Nicole.Greene@hhs.gov>

Subject: FW: POLITICO - changes to Office of Women's Health website

Importance: High

FYI we are on it.

From: Broido, Tara (HHS/OASH) Sent: Tuesday, March 20, 2018 3:28 PM

To: Bishop-Crawford, Jennifer (OS/OASH); Wasserman, Jill (OS/OPHS)

Cc: Vafiades, Mark (HHS/OASH)



HHS-18-0191-A-000259

Subject: FW: POLITICO - changes to Office of Women's Health website

Importance: High

Let's discuss ASAP.

From: Dan Diamond [mailto](b)(6) @politico.com]

Sent: Tuesday, March 20, 2018 3:02 PM

To: Broido, Tara (HHS/OASH) < Tara.Broido@hhs.gov>

Subject: POLITICO - changes to Office of Women's Health website

Hi Tara -

I'm looking into the reason behind multiple, targeted changes to WomensHealth.gov, all made in the past year, that reduced access to LGBT resources and information.

For instance, the "lesbian and bisexual health" page appears to be totally missing from the website. https://web.archive.org/web/20170919061935/https://www.womenshealth.gov/a-z-topics/lesbian-and-bisexual-health

Similarly, a fact sheet on lesbian and bisexual health issues also is missing. https://web.archive.org/web/20170513040554/https://www.womenshealth.gov/publications/our-publications/fact-sheet/lesbian-bisexual-health.html

The terms "Bisexual and lesbian health" and "lesbian and bisexual health" were removed from an A-Z listing.

https://www.womenshealth.gov/a-z-topics/

My questions:

- · Why were these pages taken down and the resources removed? Who made the decision to do so?
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My deadline is 8 pm this evening. Feel free to reach me by phone if that's easier.

Thanks

- DD

202-374-840

Sender: Greene, Nicole (OS/OASH)		
Recipient:	Broido, Tara (HHS/OASH)	
Sent Date:	2018/03/20 15:39:08	
Delivered Date:	2018/03/20 15:39:00	



From:	Jamie McConnell <(b)(6) @womensvoices.org>
To:	Thin(6) Deacog.org>; Thin(6) Thin(6)
Subject:	New Factsheet on Hazards in Lubricants
Date:	2017/02/08 11:50:39
Priority:	Normal
Туре:	Note

Just in time for Valentine's day, Women's Voices has developed a new resource on potential hazards of personal lubricants for women. Please share the FS with your networks and on social media (sample posts below). There is also a blog you can post on your website (attached).

Surveys show that 65% of American women report having used a lubricant in the past month. While they can be very effective at reducing discomfort at the time they are used, researchers are becoming increasingly concerned about the potential longer term health effects of exposure to these products. Unfortunately, in many cases, not enough care has been taken to design lubricants that are truly safe and healthy for vaginal tissue.

Highlights include:

- Toxic chemicals found in some lubes: Chlorhexidine gluconate, parabens (commonly methylparaben and/or propylparaben), cyclomethicone, cyclopentasiloxane and cyclotetrasiloxane and undisclosed flavors or fragrance
- Concerns about the pH and osmolalities of lubricants
- Recommendations for safer options

Main Fact Sheet

Slippery Slope: Potential Hazards of Lubricants for Women: http://www.womensvoices.org/lubricants-womens-health/

Other resources on lubricants

- -Ingredients found in Lubricants: http://www.womensvoices.org/ingredients-of-lubricants-chemicals-of-concern/
- -Osmolality and pH Properties of Some Commercial Lubricants

Charts: http://www.womensvoices.org/osmolality-ph-properties-commercial-lubricants/

-PDF of the fact sheet: http://www.womensvoices.org/wp-content/uploads/2017/02/lubricants factsheet final.pdf

Sample Social Media Shares

Sample Tweets:

- Are lubricants safe? Learn the potential hazards of lubricants for women http://bit.ly/2kR0QRK #detoxthebox



- Slippery Slope: @women4earth reviews the potential hazards of lubricants for women http://bit.ly/2kROQRK
- Just in time for #valentinesday get the facts on #lubricants &learn which ingredients to avoid http://bit.ly/2kROQRK
- Slippery Slope: What's in your lube and is it safe? http://bit.ly/2kR0QRK #detoxthebox via @women4earth
- Recent survey found 65% of US women report using a lubricant in the past month but is your #lube safe? Find out http://bit.ly/2kROQRK

Sample Facebook Posts:

- -Surveys show that 65% of American women report having used lubricant in the past month. And, unfortunately, many lubes are not actually designed to be compatible with a healthy vagina. Is your lube safe? Find out: http://www.womensvoices.org/lubricants-womens-health/
- Did you know? Harsh chemical ingredients found in lubricants can also be toxic to vaginal tissue and its microbiome. (The microbiome is the balance of microorganisms that naturally inhabit the vagina.) Find out more at: http://www.womensvoices.org/lubricants-womens-health/
- Just in time for Valentine's Day... Get the facts on lubricants, learn which ingredients to avoid, and how to find safer options! http://www.womensvoices.org/lubricants-womens-health/
- Do you know the osmolality and pH properties of your lubricant? You should... Find out why and if your lube is safe. #detoxthebox http://www.womensvoices.org/lubricants-womens-health/

Jamie McConnell
Director of Programs and Policy
Women's Voices for the Earth
Our Health. Our Future. Toxic Free.

phone: <u>406-543-9637</u> <u>www.womensvoices.org</u>

Sender:	Jamie McConnell (b)(6) @womensvoices.org>
Recipient:	<pre></pre>
Sent Date:	2017/02/08 11:50:17
Delivered Date:	2017/02/08 11:50:39



Marshall, Candace (OS/OASH)			
То:	Greene, Nicole (OS/OASH)		
Subject:	RE: Clearance of OWH videos on PCOS and Breastfeeding		
Date:	2018/03/20 14:45:25		
Priority:	Normal		
Туре:	Note		

Thank you!!!

From: Greene, Nicole (OS/OASH)
Sent: Tuesday, March 20, 2018 2:41 PM
To: Marshall, Candace (OS/OASH)

Subject: RE: Clearance of OWH videos on PCOS and Breastfeeding

Yes ma'am.

Nicole Greene Acting Director Deputy Director



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Office on Women's Health
Office of the Assistant Secretary for Health
Office of the Secretary

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Nicole.Greene@hhs.gov

Main: 202-690-7650 | Direct: 202-205-2614

From: Marshall, Candace (OS/OASH) Sent: Tuesday, March 20, 2018 2:23 PM

To: Greene, Nicole (OS/OASH) < Nicole.Greene@hhs.gov>

Subject: RE: Clearance of OWH videos on PCOS and Breastfeeding

Hi Nicole,

I hope that you are having a good day.

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Thanks! Candace

(b)(5)	

From: Greene, Nicole (OS/OASH)

Sent: Tuesday, February 13, 2018 9:43 AM

To: Marshall, Candace (OS/OASH) **Cc:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Clearance of OWH videos on PCOS and Breastfeeding

Yes. Glad you reminded me! they slipped off my radar! I will put them on my calendar!!

Nicole Greene

Acting Director Deputy Director





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Office of the Secretary

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Nicole.Greene@hhs.gov

Main: 202-690-7650 | Direct: 202-205-2614

From: Marshall, Candace (OS/OASH) **Sent:** Tuesday, February 13, 2018 9:13 AM

To: Greene, Nicole (OS/OASH)

Cc: Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Clearance of OWH videos on PCOS and Breastfeeding

Hi Nicole,

Can you review the videos by Tuesday, February 20?

Candace Marshall, MPH Health Communications Specialist/ Social Media Lead



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U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

Email: Candace.Marshall@hhs.gov

Main: 202-690-7650 | Direct: 202-690-5414

Websites: www.girlshealth.gov | www.girlshealth.gov | <a href="www.girlsh

From: Greene, Nicole (OS/OASH)

Sent: Tuesday, February 06, 2018 3:00 PM

To: Marshall, Candace (OS/OASH) **Cc:** Bishop-Crawford, Jennifer (OS/OASH)

Subject: RE: Clearance of OWH videos on PCOS and Breastfeeding

Hi Candace,



When do you need this by?

Nicole Greene

Acting Director Deputy Director



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Office of the Assistant Secretary for Health
Office of the Secretary

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Nicole.Greene@hhs.gov

Main: 202-690-7650 | Direct: 202-205-2614

Websites: www.girlshealth.gov | www.girlshealth.gov | <a href="www.girlsh

From: Marshall, Candace (OS/OASH) **Sent:** Tuesday, February 06, 2018 2:54 PM

To: Greene, Nicole (OS/OASH)

Cc: Bishop-Crawford, Jennifer (OS/OASH)

Subject: Clearance of OWH videos on PCOS and Breastfeeding

Hi Nicole,



(5)	

Thanks, Candace

Candace Marshall, MPH Health Communications Specialist



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U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

Email: Candace.Marshall@hhs.gov

Main: 202-690-7650 | Direct: 202-690-5414

Sender:	Marshall, Candace (OS/OASH)
Recipient:	Greene, Nicole (OS/OASH)
Sent Date:	2018/03/20 14:45:24
Delivered Date:	2018/03/20 14:45:25



	Nixon, Emmett (HHS/OASH)
To:	Greene, Nicole (OS/OASH)
Subject:	FW: iGIANT
Date:	2017/01/26 12:02:45
Priority:	Normal
Туре:	Note

Nicole, the information below is related to our conversation yesterday about the award to this office from Dr. Saralyn Mark and her non-profit, IGIANT.

Cordially,

Emmett J. Nixon Staff Assistant



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Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Emmett.Nixon@hhs.gov

Main: 202-690-7650 | Direct: 202-260-2845

Fax:202-205-0626

Websites: www.womenshealth.gov | www.girlshealth.gov OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov Connect with us on: Twitter | Facebook | YouTube | RSS

From: smark@solamedsolutions.com [mailto:smark@solamedsolutions.com]

Sent: Wednesday, January 25, 2017 5:16 PM

To: Nixon, Emmett (HHS/OASH)

Subject: iGIANT

Emmett-the fact sheet and volunteer PD is attached. Hope to have www.igiant.org up and running by the week's end. Please send out far and wide next week (after we get the website up).

Thanks! Sara

Saralyn Mark, MD President SolaMed Solutions, LLC



202-230-4101

smark@solamedsolutions.com

www.solamedsolutions.com www.stellarmedicine.com

www.stenarmearchie.com	
Sender:	Nixon, Emmett (HHS/OASH)
Recipient:	Greene, Nicole (OS/OASH)
Sent Date:	2017/01/26 12:02:44
Delivered Date:	2017/01/26 12:02:45



From:	Greene, Nicole (OS/OASH)
То:	Evans, Syreeta (OS/OASH)
Subject:	FW: Women's Caucus: National Women's Health Week
Date:	2017/02/28 14:41:00
Priority:	Normal
Туре:	Note

This needs to be added to my agenda for Jewell

Nicole Greene

Acting Director



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U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Nicole.Greene@hhs.gov

Main: 202-690-7650 | Direct: 202-205-2614

From: Tytel, Jessica (OS/OASH)

Sent: Tuesday, February 28, 2017 2:20 PM

To: Wasserman, Jill (OS/OPHS)

Cc: Greene, Nicole (OS/OASH); Bishop-Crawford, Jennifer (OS/OASH); Polacek, Aaron (OS/OASH)

Subject: RE: Women's Caucus: National Women's Health Week

Hi Jill:

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Let me know if you have any other questions.
Thanks. Jessica
Jessica
Jessica Tytel, MPH
Senior Advisor
×
OWH_logo_150
Office on Women's Health
U.S. Department of Health and Human Services
E-mail: jessica.tytel@hhs.gov
Direct: 202-260-6882
From: Wasserman, Jill (OS/OPHS)
Sent: Tuesday, February 28, 2017 12:21 PM
To: Tytel, Jessica (OS/OASH): Bishon Crawford, Jonnifor (OS/OASH)
Cc: Greene, Nicole (OS/OASH); Bishop-Crawford, Jennifer (OS/OASH) Subject: FW: Women's Caucus: National Women's Health Week
The state of the s
Hi Jessica –
Before you go on maternity leave, I wanted to check in with you on this.
(b)(5)
(5)(5)
Therefore
Thank you,
Jill



From: Goldberg, Janet (HHS/ASL) Sent: Friday, May 06, 2016 5:18 PM **To:** Singleton, Sara M. (HHS/ASL); Berge, Kathryn (HHS/ASL); Lee, Nancy C. (HHS/OASH); Wasserman, Jill (OS/OPHS); Tytel, Jessica (OS/OASH); Polacek, Aaron (OS/OASH)

Subject: FW: Women's Caucus: National Women's Health Week

FYI, the Women's Caucus leadership notified the full caucus.

From: McCarthy, Margaret [mailto:Margaret.McCarthy@mail.house.gov]

Sent: Friday, May 06, 2016 5:16 PM

To: Munasifi, Renee; Moran, Kelsey; Payne, Reagan

Cc: Goldberg, Janet (HHS/ASL)

Subject: Women's Caucus: National Women's Health Week

Dear Women's Caucus Staff,

We wanted to share the below and attached information from HHS about National Women's Health Week, which is next week.

Please contact Janet Goldberg at Janet.Goldberg@hhs.gov if you have any questions.

For the past 17 years, the U.S. Department of Health and Human Services Office on Women's Health has led National Women's Health Week (NWHW). The week serves as a time to help women understand what steps they can take to improve their health. Specifically, we encourage them to get active, eat healthy, pay attention to their mental health, visit a health care provider for a well-woman visit and preventive screenings, and avoid unhealthy behaviors, such as smoking and texting while driving. This year, we will celebrate NWHW from May 8–14, 2016.

We know health needs change as individuals age. Accordingly, we are focusing on women's health needs by decade to help them understand what steps to take for good health and well-being based on their age. For example, women in their 50's generally need to start getting colorectal cancer screenings – and some women should be screened earlier than age 50, if they have certain risk factors. When women know which preventive screenings they need, they can be proactive about their health. As part of NWHW, we educate women about the many preventive services they can receive without a copay, including an annual well-woman visit. Promoting regular care is essential to finding many diseases early, when they are easier to treat.

The Office on Women's Health depends on public officials like you to help us reach women. There are many ways you may join the celebration:

- Issue a proclamation recognizing NWHW.
- Write about NWHW on your website, blog or newsletter. You can also submit an op-ed to a local newspaper about the importance of women's health.
- Engage in NWHW social media activities. Remember to use #NWHW in any messages you share about the week.



- Take and promote the NWHW <u>pledge</u>.Direct women to our interactive pledge map, and challenge them to take steps for better health at any age.
- Share our NWHW infographics.
- Join the NWHW <u>Thunderclap</u> and encourage your constituents to do the same.
- Add the NWHW <u>Web banner to your website</u> to direct constituents to important health information and resources on the NWHW website.
- For the latest NWHW news, like the Office on Women's Health on Facebook (<u>facebook.com/HHSOWH</u>) and follow us on Twitter (<u>@womenshealth</u>) and Pinterest (<u>pinterest.com/womenshealth</u>). This will also make it easier to share our content.

We ask that you invite your constituents to support NWHW in any way they feel is appropriate for them. Attached is the NWHW Fact Sheet that you can use to support the celebration.

We hope you will join us in observing NWHW and encourage women to prioritize their health.

Sender:	Greene, Nicole (OS/OASH)
Recipient:	Evans, Syreeta (OS/OASH)
Sent Date:	2017/02/28 14:41:35
Delivered Date:	2017/02/28 14:41:00



From:	ANTHONY GREENE (TSD) <ac.greene@usss.dhs.gov></ac.greene@usss.dhs.gov>
То:	Greene, Nicole (OS/OASH)
Subject:	RE: OPEN SEASON - FEDERAL BENEFITS FAST FACTS
Date:	2017/11/14 11:53:46
Priority:	Normal
Туре:	Note

(b)(5)

From: Greene, Nicole (OS/OASH) [mailto:Nicole.Greene@hhs.gov]

Sent: Tuesday, November 14, 2017 11:33 AM

To: ANTHONY GREENE (TSD)

Subject: FW: OPEN SEASON - FEDERAL BENEFITS FAST FACTS

(b)(5)

Nicole Greene

Acting Director Deputy Director



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Office on Women's Health

Office of the Assistant Secretary for Health

Office of the Secretary

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Nicole.Greene@hhs.gov

Main: 202-690-7650 | Direct: 202-205-2614

From: For OS announcements to all of HHS [mailto:HHS-NEWS-ALL@LIST.NIH.GOV] On Behalf Of

HHS News (HHS/ASPA)

Sent: Tuesday, November 14, 2017 11:19 AM

To: HHS-NEWS-ALL@LIST.NIH.GOV

Subject: OPEN SEASON – FEDERAL BENEFITS FAST FACTS





2017 Federal Benefits Open Season Nov 13 - Dec 11, 2017

OPEN SEASON STARTS TODAY!!!!

Federal Benefits FastFacts

What to Consider During the Federal Benefits Open Season November 13 – December 11, 2017

Open Season is the time of year when you have the opportunity to make decisions about your benefits under the Federal Flexible Spending Account Program (FSAFEDS), the Federal Employees Dental and Vision Insurance Program (FEDVIP), and the Federal Employees Health Benefits (FEHB) Program.

If you already have an FSAFEDS account, it will not continue automatically: you must reenroll for 2018.

If you take no action, your current enrollment in FEDVIP and/or FEHB will continue automatically for 2018. You will be subject to any changes in premiums, benefits, and service areas.

We strongly recommend you evaluate your current enrollment status in the Programs. We have listed three basic questions to ask yourself. All are equally important and should be considered carefully.

1. What are my and/or my family's expected health care needs for 2018?

Federal Flexible Spending Account Program (FSAFEDS)

What are my out-of-pocket expenses going to be (e.g., deductibles, copays, coinsurances, day care and elder care expenses, over-the-counter drugs and medicines [prescription required except for insulin] and other over-the-counter products)? Does my child need braces or use acne treatments? Will I send my children (under age 13) to a non-overnight summer camp next year?

• Federal Employees Dental and Vision Insurance Program (FEDVIP)



Do I only need routine dental care? Will I need a crown or a root canal? Does my child need braces?

Do I need glasses and/or contact lenses? Am I considering Lasik surgery?

Federal Employees Health Benefits (FEHB) Program

Am I expecting a new baby? Do I need surgery? Will my medication needs change?

2. What benefits are available in 2018?

Now that you have an idea of what services you may need, the next step is to determine what benefits the plans provide in 2018. If you are already enrolled, please review the "How We Have Changed for 2018" section of your 2018 FEDVIP brochure and Section 2 "Changes for 2018" of your 2018 FEHB plan brochure for any benefit changes.

FSAFEDS

• Should I enroll in a health care account and/or a dependent care account? How much should I contribute to my FSAFEDS account(s)?

FEDVIP and FEHB

- Are there plan limitations (i.e., number of visits or dollar maximums) which will result in out-of- pocket expenses?
- Are any services I may need (such as chiropractic care or Lasik surgery) not covered?
- What is my share of the cost of prescription drugs? (FEHB only)
- What deductibles, copays, and coinsurances must I pay?
- Do I have enough coverage for extensive dental work?
- Do I have enough coverage for glasses, exams, contact lenses, or other vision services?

3. How much will it cost?

Now that you have an idea of what services you may need and what types of benefits are provided by FSAFEDS, FEDVIP, and/or FEHB plans, the third consideration is cost.

Enrolling in FSAFEDS is free to you. You just have to decide how much (from a minimum of \$100 to a maximum of \$2,600 per participant for a health care account and/or \$5,000 per household for a dependent care account) to contribute from your salary, which you'll get back when you incur eligible expenses.

Look at the 2018 premiums for the FEDVIP and/or FEHB plan you are already enrolled in or considering enrolling in. You can find the premiums in the 2017 FEDVIP and FEHB brochures and on our website at http://www.opm.gov/insure.



4. What do I do now?

Now that you have considered these questions, you are on your way to making more informed decisions about your benefit choices for 2018. If you want to participate in FSAFEDS for 2018, you **must** make a new election. If you are satisfied with your FEDVIP plan and/or FEHB plan, you do not have to do anything. Your FEDVIP and/or FEHB enrollment(s) will continue for 2018. If you are not satisfied with your current enrollment status, please visit our website and your human resources office and look at the following resources to assist you in making decisions.

- FSAFEDS brochures at http://www.FSAFEDS.com
- FEDVIP brochures at http://www.opm.gov/healthcare-insurance/dental-vision/plan-information
- FEHB brochures at http://www.opm.gov/FEHBbrochures
- OPM's plan comparison tool at http://www.opm.gov/fehbcompare
- Checkbook another plan comparison tool at http://www.checkbook.org/newhig2/hhs.cfm

5. How Employees Enroll or Change Enrollment?

- FEHB myPay electronic enrollment system or in rare cases SF 2809. Consult with your servicing HR Office when a SF 2809 would be used.
- FEDVIP www.BENEFEDS.com or 1-877-888-3337 (TTY 1-877-889-5680)
- FSAFEDS www.FSAFEDS.com or 1-877-372-3337 (TTY 1-800-952-0450)

Do not rely solely on this fact sheet.

Always refer to the individual plan brochures before making your final decision.

*Please note you are receiving this email because you are using an email account supported by the Department of Health and Human Services. HHS News cannot remove you from this email list. Please do not respond to this email. If you have questions or comments regarding the content above, please contact the sponsoring organization listed. If you would like to submit a message for HHS News dispersal, please email HHS.News@hhs.gov. Thank you.

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Sender:	ANTHONY GREENE (TSD) <ac.greene@usss.dhs.gov></ac.greene@usss.dhs.gov>
Recipient:	Greene, Nicole (OS/OASH)
Sent Date:	2017/11/14 11:44:26
Delivered Date:	2017/11/14 11:53:46



From:	Hurwitz, Emily (HHS/OASH)
То:	Smith, Adrienne M. (OS/OASH) ; Tytel, Jessica (OS/OASH)
Subject:	ACA Report: All in one place
Date:	2018/01/19 17:32:21
Priority:	Normal
Туре:	Note

Hi Jessica and Adrienne,

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Creator:	DHHS
LastModifiedBy:	Hurwitz, Emily (HHS/OASH)
Revision:	2
LastPrinted:	2018-01-19T14:47:00Z
Created:	2018-01-19T22:20:00Z
Modified:	2018-01-19T22:20:00Z
Template:	Normal
Application:	Microsoft Office Word
Company:	DHHS
AppVersion:	16.0000
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Good luck!

Emily

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	Sender:	Hurwitz, Emily (HHS/OASH)
		Smith, Adrienne M. (OS/OASH) ; Tytel, Jessica (OS/OASH)
	Sent Date:	2018/01/19 17:32:03
	Delivered Date:	2018/01/19 17:32:21



From:	NASHP News <newsletter@nashp.org></newsletter@nashp.org>
То:	Smith, Adrienne M. (OS/OASH)
Subject:	[MARKETING EMAIL]2017 Survey of CHIP Directors and New Fact Sheet Looks at Lead Screening & Treatment in Medicaid & CHIP
Date:	2017/02/21 12:28:09
Priority:	Normal
Туре:	Note



Newsletter

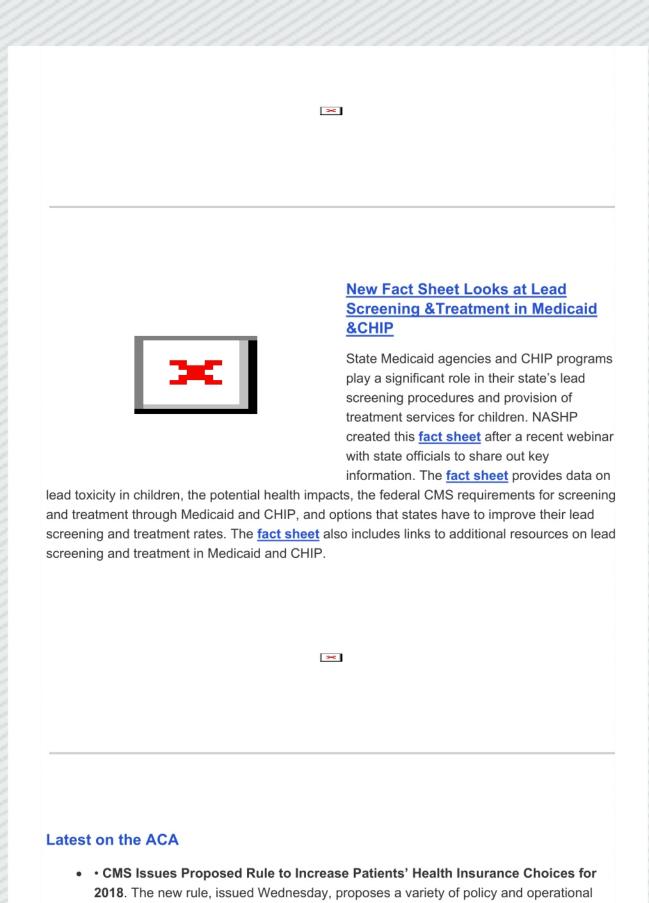
February 21, 2017





Federal funding for the Children's Health Insurance Program (CHIP) is set to end on September 30, 2017 without Congressional action. NASHP surveyed CHIP officials to provide an overall snapshot of state budgeting and planning given the current context of program funding uncertainty and to learn about any recent changes in their CHIP programs. Click here to see the survey results.







- changes intended to stabilize the insurance markets. Read the <u>full proposed rule here</u>. Read Tim Jost's <u>summary</u>.
- CMS administrator nominee <u>Seema Verma</u> testified last <u>week</u> before the Senate Finance Committee
- House GOP presents ACA replace strategy. Thursday, the House GOP presented a
 new policy brief and resources offering details about their current strategy for ACA
 repeal and replace. New York Times summarizes.
- California eyes contingency plans in case of repeal. State lawmakers are
 discussing "placeholder bills" in preparation for potential repeal of the ACA by federal
 leaders. Meanwhile, leaders in Los Angeles County are contemplating a county-wide
 measure to ensure residents will not lose coverage if the law is repealed.
- Stateline looks at the effect of repeal on addiction services. Health care advocates
 are <u>cautioning</u> that any cut to federal funding for addiction treatment could reverse the
 progress that states, especially states that have expanded Medicaid, battling the nation's
 opioid epidemic.
- New primer examines current state of the individual market. The Kaiser Health
 News <u>primer</u> offers a basic description of the current individual insurance market
 including enrollment, average plan costs, challenges confronting the individual market,
 and potential effects on the market if the ACA is repealed.

NASHP's Children's Health Insurance Resources Page

*

NASHP's <u>Resources Page</u> on children's coverage provides important information for state officials and other stakeholders as federal policymakers consider changes to health coverage, and with federal funding for the Children's Health Insurance Program (CHIP) uncertain beyond September 2017. <u>NASHP's resources</u> on CHIP and children's coverage describe and analyze policy issues and options and are intended to help inform state and national policy discussions about the future of children's coverage.



Call For Ideas: NASHP's 30th Annual State Health Policy Conference

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Submissions due by March 10, 2017

As the health policy community across the nation engages in discussions about the future of the ACA, three things are clear 1. Uncertainty poses challenges for state policymakers 2. Not withstanding, state leaders have programs to run and people to serve, even as the policy debate continues and 3. NASHP will hold its <u>30th Annual State Health Policy Conference</u> October 23-25, 2017 in Portland, Oregon to explore these emerging issues and opportunities and focus on innovation and reform underway at the state level.

NASHP invites you to help construct the agenda for the 30th Annual State Health Policy Conference. We welcome all ideas for topics and speakers and we will organize the agenda to accommodate late breaking developments. Your submission can be as simple as a sentence or two describing your idea (no more than 65 words) and should be submitted **electronically**.

All submissions are due by Friday, March 10. All submissions received by the deadline will be shared with NASHP's conference planning committee, state leaders who volunteer their time to plan our agendas. If your idea is incorporated into the agenda, NASHP staff will follow up with you by June 30, 2017.

Thank you for your interest in NASHP's Annual State Health Policy Conference, and for joining NASHP in its commitment to promoting excellence in state health policy and practice. We hope to see you in Portland!

Submissions due by March 10, 2017

Submit here

Parity Webinar #2: Application of Mental Health and Substance Use Disorder Parity Requirements to Medicaid and Children's Health Insurance Programs

This second webinar in a three-part series will be held on February 23, from 3:00-4:30 p.m. ET. This webinar series is intended to help state Medicaid and CHIP agencies plan and implement their parity analyses by providing a detailed discussion of the Parity Compliance Toolkit and Implementation Roadmap, and by providing an opportunity for states to ask questions. Webinar #2 will provide details on the following key steps in the parity analysis:

Identifying Benefit Packages



- · Defining Mental Health/Substance Use Disorder (MH/SUD) Benefits
- Defining Classifications and Mapping Benefits to Classifications
- Identifying and Analyzing Financial Requirements (FRs) and Quantitative Treatment Limitations (QTLs)
- Identifying and Analyzing Aggregate Lifetime and Annual Dollar Limits (AL/ADLs)

Register Now

Parity Webinar #3: Application of Mental Health and Substance Use Disorder Parity Requirements to Medicaid and Children's Health Insurance Programs

This third webinar in a three-part series will be held on March 9, from 3:00-4:30 p.m. ET. This webinar series is intended to help state Medicaid and CHIP agencies plan and implement their parity analyses by providing a detailed discussion of the Parity Compliance Toolkit and Implementation Roadmap, and by providing an opportunity for states to ask questions. Webinar #3 will provide details on the following key steps in the parity analysis:

- Identifying and Analyzing Non-Quantitative Treatment Limits (NQTLs)
- Availability of Information Requirements
- Documentation of Parity Compliance (state website, MCO contracts, ABPs, and CHIP SPAs)

State Medicaid and CHIP officials with questions about the mental health and substance use disorder parity rule, the Parity Compliance Toolkit, or the Parity Implementation Roadmap can submit them to parity@cms.hhs.gov.





Open Position: Policy Associate – Emerging Issues Team

The National Academy for State Health Policy (NASHP) is looking for a Policy Associate to join our Emerging Issues team! Work will focus on state health insurance and exchanges; health care costs; and a wide array of health issues that confront states in today's dynamic environment. The Policy Associate is a midlevel position and applicants must have strong analytic and writing skills and ability to work closely with state officials and the NASHP team. A legal background and/or experience in state government, particularly working in a state based exchange, insurance department or legislative staff, is strongly preferred. For more information and to apply.

National Academy for State Health Policy

The National Academy for State Health Policy (NASHP) is an independent academy of state health policymakers who are dedicated to helping states achieve excellence in health policy and practice. A non-profit and non-partisan organization, NASHP provides a forum for constructive work across branches and agencies of state government on critical health policy issues. For more information visit www.nashp.org.









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Priority:	Normal
Туре:	Note







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From:	UCLA Center for Health Policy Research <healthpolicy@ucla.edu></healthpolicy@ucla.edu>
То:	Smith, Adrienne M. (OS/OASH)
Subject:	Health insurance coverage for Latino noncitizens; Immigrant RIGHTS project; Ford and Sears new faculty associates
Date:	2018/02/28 12:50:03
Priority:	Normal
Туре:	Note

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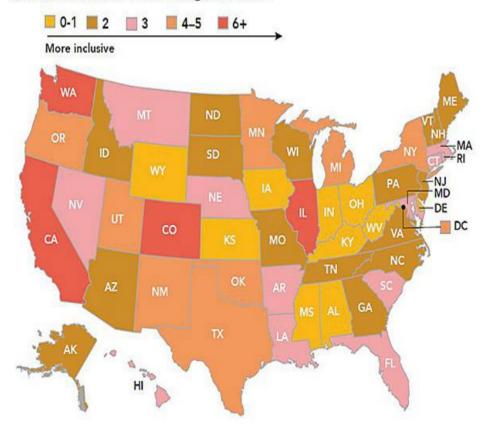
IN THIS EDITION:

Inclusive state polices boost health insurance coverage for Latino noncitizens

Granting more rights and protections to Latino noncitizens may help improve their access to health







Non-citizen Latinos living in states that have policies that include and protect them are more likely to have health insurance compared to those living in states that lack such policies, according to a new <u>fact sheet</u> from the <u>UCLA Center for Health</u> Policy Research.

However, their overall chance of having health insurance is still far below that of naturalized Latino immigrants and Latino citizens.

"Immigrants are likely to be healthier in states with friendly policies," said <u>Maria-Elena Young</u>, lead author of the fact sheet. "But they still lag far behind naturalized Latinos and even farther behind citizens generally."



Read the fact sheet

Read the press release

Three questions for the expert

"The federal government's attitude...seems to have strengthened



cohesion of California stakeholders and advocates."

□-- Paul Dourgnon

Paul Dourgnon, Center faculty associate and research director at the Paris-based French Institute for Research and Information in Health Economics, discussed in the Center's Feb. 21 Health Policy Seminar how immigrants are served by California's health safety net, using France's health care system as a comparison point. He used data from the California Health Interview Survey as well as county stakeholder interviews to research what the health outcomes are for immigrants in California who are able to access services.

□ In this <u>brief interview</u>, Dourgnon discusses undocumented immigrants' obstacles to health services in California, the role of safety-net health centers in providing care to them, and the impact of a hostile political environment.



Dourgnon

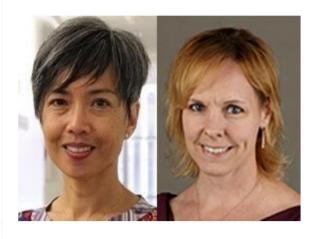
Read the interview

Watch the Feb. 21 seminar

Save the date: March 19



"Critical Policy Priorities for Breast Cancer Care in California"



Ponce and Scheitler

In 2018, over 29,000 women will be diagnosed with breast cancer in California, and an estimated 4,500 will die of the disease. Yet patients and survivors continue to face serious economic, emotional and structural barriers to care, all while balancing family and work obligations.

On March 19, the Center will release key findings from a two-year study of the obstacles breast cancer patients face accessing care in California.

At a <u>noon seminar</u> on the same day, authors <u>Ninez Ponce</u>, associate Center director, and researcher <u>AJ Scheitler</u> will discuss three of the most pressing obstacles: 1) A need for patient navigators to help breast cancer survivors understand and access services; 2) A lack of continuity of care within the complex system of providers, support services and insurance requirements, and; 3) The particular obstacles facing low-income women, including narrow provider networks and time limits on coverage.

□ Please join us for this critical discussion of how California can better extend lifesaving, life-extending treatments and services that enhance quality of life for survivors of this highly-prevalent disease.



□What:

"Critical Policy Priorities for Breast Cancer Care in California"

When:

Monday, March 19, 2018 Noon - 1 p.m. PST

Where:

UCLA Center for Health Policy Research
10960 Wilshire Blvd., Suite 1550
Los Angeles, CA 90024 [Map]

Join us in person

Join us via live stream



New faculty associates bring experience on racism, LGBT discrimination to the center



dra Ford

Ford

Chandra L. Ford, PhD, is a faculty associate and associate professor of community health sciences and founding director of the Center for the Study of Racism, Social Justice and Health in the UCLA Fielding School of Public Health. Ford's research examines the relationships between racism-related factors and disparities in the HIVcare continuum and how it advances conceptual and methodological tools available for studying racism's relationship to health disparities. Ford earned her Ph.D. from the Gillings School of Global Public Health at the University of North Carolina.

She completed postdoctoral fellowships in social medicine at the University of North Carolina and epidemiology at Columbia University, where she was a Kellogg Health Scholar at the W. K. Kellogg Foundation.

Brad Sears, JD, is the associate dean of public interest law at the UCLA School of Law and the David S. Sanders Distinguished Scholar at the Williams Institute, a think tank on sexual orientation and gender identity law and public policy. He is the founding director of the Williams Institute and was its executive director from 2002 to 2017. His area of research includes discrimination against people living with HIV/AIDS in health care; discrimination against LGBT people; the criminalization of people living with HIV/AIDS; and the cost and/or business impact of stigma and discrimination against LGBT people.



Sears

Sears graduated summa cum laude from Yale University and magna cum laude from Harvard Law School.



Center launches immigrant RIGHTS project





Nadereh Pourat, far left, and Maria-Elena Young, standing, in a RIGHTS small group session.

Steven P. Wallace, center back row, and RIGHTS advisory board participants.



Associate Center Director <u>Steven P. Wallace</u>, Director of Research <u>Nadereh</u> <u>Pourat</u>, Faculty Associate <u>Michael Rodriguez</u>, and Graduate Student Researcher <u>Maria-Elena Young</u> began a project that will assess how states' policies help or harm the health of the nation's immigrants.

□The Research on ImmiGrant HealTh and State policy project will use CHIS data on the health of immigrants along with a supplemental survey of 2,000 Latino and Asian immigrants statewide. They will also collect in-depth qualitative interviews with immigrants in Fresno and Los Angeles counties. The project is informed by a Community Advisory Board, shown here at their first meeting at the Center on Jan. 29.

Find more information on the RIGHTS project

Journal article: Attacking dental problems early yields health and financial dividends





If chronically ill adults with Medicaid coverage could access regular preventive dental care, it would keep them healthier and lower the need for more costly and complicated treatment later, according to a <u>study</u> led by Center Director of Research <u>Nadereh Pourat</u>.

The study reports Medicaid patients who had \$40 in preventative care expenditures on average, and received preventative care in 2007 led to \$33 savings in treatment expenses in 2008 compared with those who went without preventative dental care.

Pourat

The biggest savings came from reduced expenditures for prosthodontic (i.e. dental bridges, implants, crowns) and periodontic care. <u>Xiao Chen</u>, assistant <u>HEER</u> director at the Center, is a co-author of the study.



Journal article: Do private health providers give dying veterans better end-of-life care?

Congress and Veterans Affairs (VA) leaders have strongly encouraged the VA to increase use of community-based private health care rather than provide care through VA doctors and medical centers. But will vets get equal or better care? Center Faculty Associate Jack Needleman co-authored a new study that looks at the quality of end-of-life-care provided to veterans using fee-for-service Medicare compared to VA-provided care for nearly 90,000 U.S. veterans dying of cancer.

Authors found that veterans using Medicare and private facilities were significantly more likely to receive high-intensity, lower-quality care (more admissions to an intensive care unit, chemotherapy, hospital stays, days spent in a hospital, and death in hospital) compared to veterans with VA-provided care. Authors suggest financial incentives present in Medicare may drive higher-intensity, end-of-life care that doesn't improve veterans' quality of



life. The study was supported by the <u>Department of Veterans Affairs Health Services Research and Development Program</u>.



Needleman

Journal article: Designed-based approach to small area estimation

Population health data at granular geographic levels are





critical for describing health needs as well as designing and evaluating health programs by health planners and policy makers. However, data from population-based health surveys usually lack sufficient geographic quality for making estimates at the local level. Hongjian Yu, director of the Center's Statistical Unit and lead author of a new study on small area estimation (SAE), and his coauthors found nonparametric models of SAE with penalized spline regression can be a useful tool in creating granular area estimates to provide supplemental information where samples are few or non-existent.

Yu

An example of this model are the ZIP Code level estimates in <u>AskCHIS</u> <u>Neighborhood Edition</u>. The Center's <u>Yueyan Wang</u>, <u>Pan Wang</u>, and <u>Ninez Ponce</u> are co-authors of the study, which was supported by <u>Kaiser Permanente</u> and <u>The</u> California Wellness Foundation.

In the media



Center data and researchers were featured this month in dozens of media stories: Capital Public Radio, Voice of San Diego, the San Diego Union-Tribune, The Hospitalist, MedPage Today, California Health Report and more.

See all of our media coverage in the Newsroom.

MEDPAGE TODAY: Center Director Gerald Kominski commented about the Amazon-Berkshire Hathaway-JPMorgan Chase plan to form their own health insurance company for employees. "If they can identify true innovations that improve quality and lower costs on a large scale, they will have found the 'holy grail' of health care delivery system reform."

<u>CAPITAL PUBLIC RADIO</u>: <u>Kominski</u> said it would be "relatively easy" for California to put into place its own individual mandate requiring residents have health insurance.



Kominski





<u>WHYY</u>: Associate Center Director <u>Steven P. Wallace</u> discussed how states differ in their views of emergency medical care in a podcast about an undocumented immigrant who risked deportation when she applied for Medicaid to get cancer treatment.

□THE HOSPITALIST: Center Director of Research Nadereh Pourat said in a story that although doctors are busy full-time doing clinical work, they could use education about health policy and "its impact on their practice."



<u>CALIFORNIA HEALTH REPORT</u>: Fine particles of air pollution affect development of the brain and lowers one measure of IQ, according to a <u>study</u> by Center Statistician Pan Wang.

<u>SAN DIEGO UNION-TRIBUNE</u>: Faculty Associate <u>Arturo Vargas Bustamante</u> was quoted in a story about cross-border health care network plans that allow employees of U.S. companies in San Diego and Imperial counties to get cheaper health care in Mexico.



News and notes



ITUP: Center Director <u>Gerald Kominski</u> attended the annual conference of the <u>Insured The Uninsured Project</u> Feb. 5-6 in Sacramento. The Center was a cosponsor of the conference.

IMMIGRATION DATA WORKSHOP: Associate Center Director Ninez Ponce and Center staff will and discuss how immigration researchers can use CHIS data to explore the impact of immigration status on health at a March 3 workshop in San Diego. Other presenters from the Center include Associate Center Director Steven P. Wallace, Data Access Coordinator Laureen Masai, Public Administration Analyst Priya Thaker, and Graduate Student Researcher Joe Viana. The workshop is hosted by the Center and The UC San Diego Center for Comparative Immigration Studies and is supported by The California Endowment.

GLOBAL CITIZENS: <u>Ponce</u> participated in a Feb. 1 panel on the role of international exchange studies in shaping global citizens. The <u>event</u> was sponsored by several groups, including the <u>UCLA International Institute</u>, <u>Asian</u> American Studies Center, and the UCLA Office of Equity, Diversity and Inclusion.

WOMEN'S ACCESS: <u>Ponce</u> will serve as faculty moderator for a panel on Access and Practice at the 2018 Thinking Gender Graduate Student Research Conference on March 2. The event is hosted by the <u>UCLA Center for the Study of Women</u>.

JANUARY RECAP: The Center's <u>Janet Frank</u> and <u>Kathryn Kietzman</u> discussed their <u>evaluation</u> of how California's public mental health delivery system serves the



mental health needs of the state's older adults and found significant geographic, cultural and system barriers to care. Forty-six people attended the seminar in person and 166 online. Watch the video here.



Martinez

LIFESAVER: Ana Martinez, a senior research associate at the Center, is one of 71 donors whose blood and platelets provided transfusions for Skye Savren-McCormick, a baby battling cancer, according to NewsMAX and other media. Martinez, who organizes donations among Center staff, has donated blood at UCLA Blood and Platelet Center for a decade.

In all, Center staff have made more than 200 donations of blood.





Ana Martinez, third from right in second row, and other blood donors meet 2-year-old Skye. □Photo by Reed Hutchinson for UCLA Health

EMPLOYMENT: The Center has an opening for a Public Administration Analyst - Project Manager/Research Analyst. UCLA Fielding School of Public Health is interviewing for Tenured Faculty: Associate/Full Professor of Health Equity. Find more information here.



About us



One of the nation's leading health policy research centers and the premier source of health-related information on Californians. Browse our free publications on health insurance, health care reform, health economics, chronic disease, health disparities and more:

www.healthpolicy.ucla.edu





CHIS is the nation's largest state health survey and one of the largest health surveys in the United States. Each year, CHIS interviews up to 50,000 or more Californians on a range of health topics. Visit us at healthpolicy.ucla.edu/chis

CHIS Logo

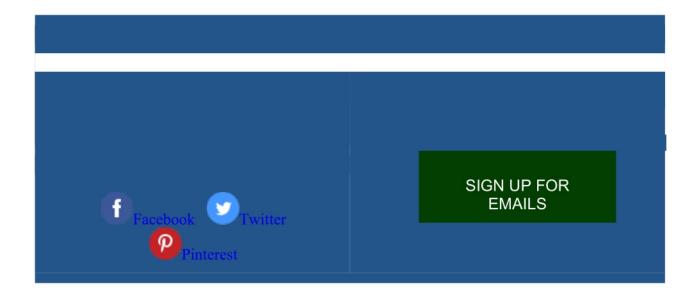


A free, easy-to-use online tool that enables journalists, health experts, policymakers and others to quickly search for health statistics on their county, region or statewide. Visit us at www.askchis.com.

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Subject:	New! Tools on Paid Family Leave & Health Equity
Date:	2017/11/29 11:32:11
Priority:	Normal
Туре:	Note



Time off to care for very young children has many health-related benefits for mothers, children, and families.

ChangeLab Solutions has developed a suite of 3 products (a fact sheet, literature review, and infographic) to provide an overview of the positive health effects of paid family leave (PFL) for families, young children, and new mothers. Time off to care for very young children has many health-related benefits for mothers, children, and families—for example, increases in health benefits associated with breastfeeding, better mother-child interactions, and decreased maternal and marital stress. Paid leave, in contrast to unpaid



leave, has been shown to reduce infant mortality and to improve other health outcomes for children.

Many workers must balance pregnancy or caregiving for young children or other family members with work responsibilities. Only a small percentage of workers have access to state-provided or employer-sponsored PFL, making it difficult for people to attain their full health potential. Moreover, low-income employees and workers of color are the least likely to have meaningful access to PFL, a fact that raises serious health equity concerns.

The <u>new publications</u> illustrate the health equity implications of PFL.

- The fact sheet highlights the key health benefits of paid leave for newborn and young children, for new mothers, and for whole families and also provides an overview of the equity-enhancing components of current state PFL laws.
- The literature review includes a more in-depth summary of the public health literature emphasizing the health benefits of PFL.
- The infographic provides a visual summary of the health benefits of PFL discussed in both the fact sheet and the literature review.

Check out all 3!

For more information on other workplace policies that support health equity, please <u>contact us</u>. Learn more about how you can <u>support our work!</u>





ChangeLab Solutions creates healthier communities for all through better laws and policies. Check out <u>Tools for Change</u>, our resource catalog, for an overview of what we offer on our website. With your <u>help</u>, we can make healthy changes in every community. <u>Contact us</u> to learn how you can get involved!

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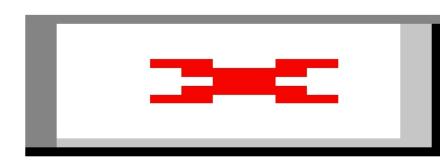
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То:	Smith, Adrienne M. (OS/OASH)
Subject:	The ABPsi at 50: From Impulse to Impact - Through the Years
Date:	2017/12/08 22:25:11
Priority:	Normal
Туре:	Note



Fact Sheet

It is no small matter that the ABPsi, as an independent and free-thinking Black organization devoted to Black Mental health and wellbeing, has survived for over fifty years. In the midst of hostility, racial hatred and ignorance, the **ABPsi impulse** has had a significant **impact**:

- Successfully fought against the mislabeling of Black Children as "mentally retarded" and wrongfully placed in classes for children with learning disabilities
- Applied Black Psychology as the therapeutic platform and intellectual foundation for the programming of a unique 501(c)3 Not-for-Profit Black Family think tank and service organization
- Used Black Psychology and the work of ABPsi as the theoretical foundation for school change in Oakland Public school system and to design and implement a community-based Disease (HIV AIDS) prevention program
- Established a professional Journal of Black Psychology that is now in its 43rd year of continuous publication



- Used Black Psychology and the work of the ABPsi to support the on-going struggles against the legally sanctioned killing of Black men and boys and to design and implement Manhood Development and Transformation programs
- Members of The ABPsi have provided culturally- responsive therapy, counseling, and advice to thousands of our people. We have taught, nurtured and guided tens of thousands of students, researched and authored dozens of books, and given lectures and workshops that have pursued and supported the liberation of the African mind and spirit as well as defended our way of life and advanced ways to restore our people to wellness

download the full list of victories FACT SHEET at www.abpsi.org

As a member of the ABPsi family, we are turning to you to continue the vision and purpose of the ABPsi. Help us carry out our mission and goals over the *next 50 years*.

Thank you for your support, and with your permission, we will list your name on The ABPsi website as a contributor to *The ABPsi at 50: From Impulse to Impact 50th Anniversary Campaign*. Also, the first 100 donors who contribute using our on-line accounts will receive one of several commemorative gifts. All of our Imani Sponsors will receive a beautiful 50th Anniversary commemorative Burrbear.

<u>Please make your donation today at ABPsi.ORG</u>. All donations are tax deductible. If you choose to send a check, please reference the 50th Anniversary Campaign and send to: The Association of Black Psychologists, Inc., 7119 Allentown Road, Suite 203, Ft. Washington, MD 20744

WE ARE COUNTING ON YOUR SUPPORT!!!!

Donate in the memory of an ABPsi family member here

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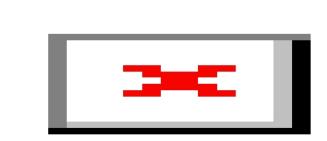
Association Of Black Psychologists,7119 Allentown Road Ste 203 Ft. Washington MD 20744, Phone Number:301-449-3082, Fax Number: (301) 449-3084, Email Address: alewis@abpsi.org, Website: www.abpsi.org

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Inside Public Health

February 2017

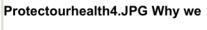


ClimateAndHealthMeetin g_Logo[3].png APHA, Gore, partners host

Climate and Health Meeting

APHA is pleased to announce the upcoming Climate and Health Meeting. Hosted by former U.S. Vice President Al Gore, APHA, The Climate Reality Project, Harvard Global Health Institute and the University of Washington Center for Health and the Global Environment, the event will take place Feb. 16 in Atlanta. The meeting, held during APHA's Year of Climate Change and Health, will be available via live

stream. Details to come.





IN THIS ISSUE

APHA news and headlines

Annual Meeting and Exponews

Opportunities



need the ACA: Show your support

Besides providing access to care for millions of newly insured Americans, the Affordable Care Act makes historic investments in prevention and public health. APHA's new fact sheet explains why we need the ACA. View the fact sheet, get talking points and urge your members of Congress to protect the ACA on our health reform page.



2014APHACongressionalRecord 1Votebutton-296x300.jpg APHA voting record scores members of Congress

Want to see how your members of Congress measure up on support for public health? APHA's congressional scorecard has the answers. The scorecard, published in the latest issue of The Nation's

Health, measures how members of Congress supported selected public health legislation during the prior year.

APHA news and headlines

NPHW_(6).jpg You can help us reach our goal of 1 billion steps

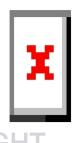
Help us walk 1 billion steps by the end of National Public Health Week! Our 1 Billion Steps



Challenge is a fun way to connect with others and take steps to improve our nation's health. The challenge runs from Jan. 9 to April 9, but you can sign up any time. Join our team, or start your own with a group of friends or co-workers. We provide the technology platform that lets you count steps by syncing your device or entering them manually. Visit our National Public Health Week website for more information. And while you're there, check out our resources for NPHW, which runs April 3-9.

2017 policy statement development cycle is underway

The 2017 policy statement development cycle is now underway. Members interested in submitting proposals should be advised that many of the materials have been updated this year and should be reviewed carefully, including the calendar, policy statement gaps, author guidelines and policy statement development policies and procedures. All materials are available on APHA's website. Policy statement proposals for the 2017 cycle are due via email by Feb. 15 at 11:59 p.m. EST.



LANDESMANS_4th-Edition_front.jpg APHA Press announces updated book on public health management of disasters

APHA Press' latest book,
"Landesman's Public Health
Management of Disasters: The
Practice Guide, 4th edition," is an
operational field and desk guide for
public health personnel who are
preparing for or responding to
disasters, and for the emergency
management community who work

Resources

Public health calendar

The Nation's Health headlines

Join the conversation on APHA's Public Health Newswire

New research published in the American Journal of Public Health

NEWS RELEASES

Public health safeguards at risk under "one-in-two-out" executive order (1/31/17)

Al Gore, APHA, Climate Reality, Harvard Global Health Institute and Others to Fill Gap Left by Canceled CDC Climaters and OIA 000856 Health Meeting HS-18-0191-A-000856 (1/26/17)



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Subject:	Ensuring Safe Drinking Water in Private Wells
Date:	2017/08/03 12:22:21
Priority:	Normal
Туре:	Note



Closing the Water Quality Gap

Ensuring Safe Drinking Water in Private Wells

Using policy to improve drinking water

The federal Safe Drinking Water Act (SDWA) regulates the nation's public drinking water supply, safeguarding drinking water for the majority of US residents. However, the SDWA



does not apply to all drinking water sources. Privately owned wells serve approximately 12% of the US population, or 34 million residents. These smaller water systems do not meet the federal definition of a public water system and therefore are not regulated by federal law.

ChangeLab Solutions developed <u>Closing the Water Quality Gap</u>, a fact sheet for state and local health department staff who want to understand how state and local policy can be used, in addition to outreach and education, to ensure access to safe drinking water for people who use private wells.

Download our new fact sheet and be sure to check out our <u>resources on water access in schools</u>.

<u>Contact us</u> with questions, <u>join our email list</u> to keep up to date on our latest work, and <u>support our work!</u>





ChangeLab Solutions creates healthier communities for all through better laws and policies. Check out *Tools for Change*, our resource catalog for an overview of what we offer on our website. With your help, we can make healthy changes in every community. Contact us to learn how you can get involved!

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From:	ChangeLab Solutions <info@changelabsolutions.org></info@changelabsolutions.org>
To:	Smith, Adrienne M. (OS/OASH)
Subject:	NEW RESOURCES! Leveraging Procurement for Health & Equity
Date:	2017/12/06 13:47:45
Priority:	Normal
Туре:	Note



Model policies for implementing nutrition standards in government food service venues.

Large institutions can promote healthier communities and more equitable food systems by leveraging their food purchasing power. Institutional purchasing decisions based on good food values also benefit the local economy and the environment. ChangeLab Solutions has created <u>resources</u> to give institutions an overview of how their purchasing decisions can contribute to a more equitable food system and what tools they can use to implement



health-promoting procurement practices.

Governments can also contribute to community health by ensuring that healthy food is served on their premises. ChangeLab Solutions has crafted <u>model policies</u> for implementing nutrition standards in government food service venues.

Check out the following resources:

- An infographic, Institutions Buying Food for Health &Equity, created in
 collaboration with the Center for Good Food Purchasing, provides a framework for
 how institutional food purchasing can promote a more just food system by supporting
 good nutrition, the local economy, fair labor practices, sustainability, animal welfare,
 and diverse businesses.
- A companion fact sheet, Establishing Healthier Food Service Guidelines for Government Facilities, explains the types of tools—policies, contracts, and permits that state and local governments can use to implement food service guidelines and ensure healthier foods at their facilities.
- State and local versions of a model policy, Healthy Food Service on Government
 Property, can be used by policymakers or community leaders to enact food service
 guidelines that set nutrition standards for foods and beverages served or sold on
 government property.

Download the <u>infographic</u>, <u>fact sheet</u>, and <u>model policies</u>. <u>Contact us</u> to learn more about implementing procurement policies for healthier communities, and <u>support our work</u> on healthy food service policies.





ChangeLab Solutions creates healthier communities for all through better laws and policies. Check out *Tools for Change*, our resource catalog, for an overview of what we offer on our website. With your <u>help</u>, we can make healthy changes in every community. <u>Contact us</u> to learn how you can get involved!

ChangeLab Solutions | www.changelabsolutions.org | (510) 302-3380

Images: ChangeLab Solutions, Black Graphics

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Manage Subscription

Sender:	ChangeLab Solutions <info@changelabsolutions.org></info@changelabsolutions.org>
Recipient:	Smith, Adrienne M. (OS/OASH)
Sent Date:	2017/12/06 13:47:17
Delivered Date:	2017/12/06 13:47:45





From:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
To:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
Subject:	FW: CDC Healthy School Highlights 9/25
Date:	2017/09/25 15:10:34
Priority:	Urgent
Туре:	Note

Dear all,

We noticed the PD Resources PDF did not attach properly to the eblast.

Please find it attached.

Thank you,

CDC Healthy Schools Highlights

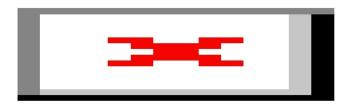
From: CDC Healthy Schools (CDC)

Sent: Monday, September 25, 2017 2:44 PM

To: CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov>

Subject: CDC Healthy School Highlights 9/25

Importance: High



CDC Healthy Schools: Healthy Students, Ready to Learn

CDC Healthy Schools | CDC Healthy Schools Highlights September 25, 2017

CDC Healthy Schools Highlights

CDC Announcements:



 CDC Healthy Schools offers a wealth of professional development (PD) resources and training. In the PDF below, we highlight tools and resources you can use to provide PD services for staff in state departments of education, state departments of health, school districts, school communities, and national organizations. Be sure to click on all of the links to see what's new and what has been revised on our PD website!





cid:image006.png@01D33605.1B8BA7B0

- CDC's Division of Adolescent and School Health (DASH) has released the 2016 School Health Policies and Practices Study (SHPPS) results. Data show significant increases in putting policies and practices in place for school health such as nutrition environment and services, physical education and physical activity, and health services and counseling. The 2016 release includes a comprehensive report that includes results from a nationally representative sample of school districts, a fact sheet highlighting key 2016 results, a fact sheet highlighting trends over time (2000-2016), all questionnaires, and a public-use dataset and technical documentation.
- Check out our latest<u>feature</u> with lots of back-to-school resources for parents. This feature includes a new podcast for parents on the importance of school health services.





State Highlights

- Staff from the North Carolina Department of Public Instruction (NCDPI) are currently
 providing training on the Comprehensive School Physical Activity Program (CSPAP) as part of
 a Whole School, Whole Community, Whole Child (WSCC) pilot in 11 local education agencies
 (LEAs). The North Carolina Division of Public Health (NCDPH) hopes to partner with them
 and help promote those efforts.
- South Carolina Department of Health and Environmental Control, along with their partners
 at the University of South Carolina, is providing professional training this fall to general
 classroom teachers, physical education teachers, and principals at elementary schools in
 three school districts. This training is a part of the Partnerships for Active Children in
 Elementary Schools (PACES) initiative and was developed and piloted by teachers in a 1305
 target school district.
 - The training will focus on the following CSPAP components:
 - The WSCC model and how it aligns with CSPAP
 - Administrative Support for CSPAP
 - Skills for Movement Integration in the Classroom
 - LET US Play principles (info on LET US Play here)

NGO Highlights

cid:image002.png@01D32D67.35300FE0 The
 Alliance for a Healthier Generation invites you to check out "Building Family and Community Support for your Wellness Efforts". This webinar addresses:



- The benefits of engaging students, parents and community members in school wellness efforts.
- Methods and strategies for informing and building support for school wellness efforts and policy



 Opportunities for student, parent and community input and decision making within the school environment to build and sustain a culture of wellness.

Check out this training and others located in the Alliance for a Healthier Generation **Training Center**. You must have a <u>registered account</u>/login to access the training center. <u>Click</u> to create an account.

CDC Healthy Schools focuses on the well-being of children, teens, and adults in schools and develops effective tools and recommendations to ensure students are healthy and ready to learn. To achieve this goal, we support state and local education and health agencies and national organizations to implement school health policies and practices. For more information, please visit https://www.cdc.gov/healthyschools/index.htm.

Sender:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
Recipient:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
Sent Date:	2017/09/25 15:09:09
Delivered Date:	2017/09/25 15:10:34



From:	communications@amchp.org>		
То:	ith, Adrienne M. (OS/OASH)		
Subject:	sident's Budget Blueprint and Call to Action		
Date:	2017/03/17 12:52:16		
Priority:	Normal		
Туре:	Note		



Dear Adrienne:

Yesterday, the President released his FY2018 budget blueprint outlining his federal spending priorities for the coming fiscal year and proposing an 18 percent reduction for the Department of Health and Human Services. The document, also known as the "skinny budget," can be found here. A full detailed budget with proposed funding levels for individual programs isn't expected until May. Some initial information is included below. Based upon the alarming depth of proposed cuts - combined with not having the opportunity for members and friends to visit with elected officials during the recent AMCHP Conference held outside Washington, DC - we are issuing this Call to Action on the importance of Congress hearing from you directly!

AMCHP is today encouraging you to contact your Senators (they can be found here) and Representatives (they can be found here - see top right corner) urging them to support increased funding for the Title V Maternal & Child Health Services Block Grant. We have included a sample advocacy message you may personalize and send to your Members of Congress. If you aren't able to engage in direct lobbying, please take this opportunity to educate your lawmakers about the value of Title V by sending an educational message (sample found below).

Thank you for doing your part to help make the case for Title V! If you have any further questions, please contact a member of our Government Affairs Team: bewig@amchp.org or ahaddad@amchp.org.

Sample Advocacy Message:



Dear:

As you work to finalize FY17 funding and begin consideration of FY18 appropriations, I want to highlight the positive impact of the Title V Maternal &Child Health Services Block Grant in our state and ask for your support of our request for \$650 million for the program in FY18 (in FY16 Title V was funded at \$638.2 million). You can find a state-specific fact sheet here.

The Title V MCH Block Grant is the only federal program of its kind devoted solely to improving the health of all women and children. Grounded in results, evidence, and state flexibility, jurisdictions use Title V to design and implement a wide range of maternal and child health programs to fit the needs of their specific populations. Although initiatives may vary among the states and jurisdictions, all work through partnerships to ensure people receive preventive services to avoid costlier chronic conditions later in life, thereby saving federal and state governments money. We also work diligently to address emerging issues, including the effect of the opioid epidemic on the maternal and child health community as well as response to the Zika virus.

Please consider me a source for information about maternal and child health in and to learn more about how Title V dollars are being put to work our community.

Sincerely,

***Be sure to include your full address and zip code

Sample Educational Message:

Dear:

I want to take this opportunity to highlight the positive impact of the Title V Maternal & Child Health Services Block Grant in our state. You may find a state-specific fact sheet here.

The Title V MCH Block Grant is the only federal program of its kind devoted solely to improving the health of all women and children. Grounded in results, evidence, and state flexibility, jurisdictions use Title V to design and implement a wide range of maternal and child health programs to fit the needs of their specific populations. Although initiatives may vary among the states and jurisdictions, all of them work with local, state, and national partners to ensure people receive preventive services to avoid costly chronic conditions later in life, thereby saving federal and state governments money. We also work diligently to address emerging issues, including the effect of the opioid epidemic on the maternal and child health community as well as response to the Zika virus.

Please consider me a source for information about maternal and child health in our state and to learn more about how Title V dollars are being put to work our community.

Sincerely,

President's Budget Background: The Association of Maternal & Child Health Programs (AMCHP) is concerned about the president's 18 percent proposed reduction to the Health and Human Services budget. Although the budget outline doesn't specifically address the Title V MCH Block Grant, it briefly mentions some programs, ranging from a statement of support for community health centers, the Ryan White HIV/AIDS



program, and the Indian Health Service, while eliminating \$403 million from health professions training programs. Additionally, the document references restructuring public health, emergency preparedness and prevention programs, and proposes a Federal Emergency Response Fund to rapidly respond to public health outbreaks such as Zika as well as a new \$500 million block grant program to states through CDC. However, without specific details it is difficult to assess how these programs are envisioned to work and how other programs within CDC would be affected. Also of interest is a proposed \$500 million increase for opioid misuse prevention efforts to increase access to treatment and recovery services.

Of course, the budget blueprint is simply step one in the process by which federal spending is determined. Though the President's outline gives clues to his priorities and in which areas he may either apply pressure on Congress to act upon or even seek structural changes from within the agencies, Congress will ultimately make determinations about how to allocate funding to specific programs. To that extent AMCHP will continue our ongoing outreach to key Congressional offices to make the case for Title V MCH Block Grant appropriations.

This e-mail was sent from Association Of Maternal And Child Health Programs (communications@amchp.org) to adrienne.smith@hhs.gov.



To unsubscribe, please click on this link and follow the instructions: Unsubscribe

Association Of Maternal And Child Health Programs, 1825 K Street NW Suite 250 Washington DC 20006, Phone Number: (202) 775-0436, Fax Number: (202) 478-5120, Email Address: info@amchp.org, Website: www.amchp.org

Sender:	<communications@amchp.org></communications@amchp.org>
Recipient: Smith, Adrienne M. (OS/OASH)	
Sent Date:	2017/03/17 12:51:24
Delivered Date:	2017/03/17 12:52:16



From:	Smith, Adrienne M. (OS/OASH)
То:	Wasserman, Jill (OS/OPHS)
Subject:	RE: CSA language review
Date:	2018/02/16 10:13:00
Priority:	Normal
Type:	Note

b)(5)	

From: Wasserman, Jill (OS/OPHS)

Sent: Friday, February 16, 2018 10:13 AM **To:** Smith, Adrienne M. (OS/OASH)

Subject: RE: CSA language review

(b)(5)			

From: Smith, Adrienne M. (OS/OASH) **Sent:** Friday, February 16, 2018 10:12 AM

To: Wasserman, Jill (OS/OPHS) **Subject:** RE: CSA language review

Thanks so much Jill.

From: Wasserman, Jill (OS/OPHS)
Sent: Friday, February 16, 2018 9:37 AM
To: Smith, Adrienne M. (OS/OASH)
Subject: RE: CSA language review

Thanks, Adrienne. I will get this in this morning, after Jenn and I review. -Jill

From: Smith, Adrienne M. (OS/OASH) **Sent:** Thursday, February 15, 2018 6:19 PM

To: Wasserman, Jill (OS/OPHS) **Subject:** FW: CSA language review

Jill,



Thanks so much, Adrienne



From: Artis, Shavon (OS/OASH)

Sent: Thursday, February 15, 2018 5:43 PM

To: Smith, Adrienne M. (OS/OASH) **Subject:** RE: CSA language review

See CDC addition below.

From: Smith, Adrienne M. (OS/OASH) **Sent:** Thursday, February 15, 2018 5:28 PM

To: Artis, Shavon (OS/OASH) **Subject:** FW: CSA language review

From: Perrotte, Brittany (HHS/OASH) **Sent:** Thursday, February 15, 2018 4:25 PM

To: Smith, Adrienne M. (OS/OASH); Nelson, Keiva (OS/OASH)

Subject: RE: CSA language review

Hi Adrienne,

(b)(5)		

I hope this helps!

Best,

Brittany

From: Smith, Adrienne M. (OS/OASH) **Sent:** Thursday, February 15, 2018 3:33 PM

To: Nelson, Keiva (OS/OASH); Perrotte, Brittany (HHS/OASH)

Subject: CSA language review

Brittany and Keiva (since Aaron is away),

I received a request yesterday to answer questions about sexual assault for the observance month edition of The Nation's Health (the APHA newspaper). Of course, this is something that Jenn needed to preliminarily clear for Jill to assist with this. It's a short turnaround, they actually need this on Monday. We have to use govt.-authorized language from our website, so I pulled this together below (and from the cleared press release). I also changed the questions a bit (the original questions are at the bottom), but Jill said that we could/should. Please review and let me know if this is a good response, the order is appropriate or if we need to add other website information. Since we has to use website language, I changed to questions to match.



(b)(5)



I need to get this to Jill by the morning.

Thanks, Adrienne

Page 875 Withheld pursuant to exemption

(b)(5)

of the Freedom of Information and Privacy Act





Original Questions

Tell us about OWH's approach to sexual assault prevention.

What are some specific strategies or programs you employ to prevent sexual assault?

What are some effective practices for prevention that are working?

What is public health's role in sexual assault prevention?

What should every person know about sexual assault?

Adrienne M. Smith, PhD, MS, CHES

Director, Division of Policy and Performance Management



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Adrienne.Smith@hhs.gov

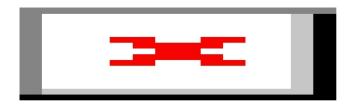
Main: 202-690-7650 | Direct: 202-690-5884 | Fax: 202-205-0626

Websites: www.womenshealth.gov | www.girlshealth.gov OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov Connect with us on: Twitter | Facebook | YouTube

Sender: Smith, Adrienne M. (OS/OASH)			
Recipient:	Wasserman, Jill (OS/OPHS)		
Sent Date:	2018/02/16 10:13:56		
Delivered Date:	2018/02/16 10:13:00		



From:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
To:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
Subject:	CDC Healthy Schools Highlights Nov 6
Date:	2017/11/06 13:43:21
Priority:	Urgent
Туре:	Note



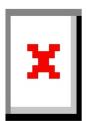
CDC Healthy Schools: Healthy Students, Ready to Learn

CDC Healthy Schools | CDC Healthy Schools Highlights November 6, 2017

CDC Healthy Schools Highlights

CDC Announcements:

- CDC's <u>2016 School Health Profiles</u> (Profiles) report is now available. The report includes:
 - o results from surveys conducted in:
 - 48 states
 - 21 large urban school districts
 - 4 territories
 - a fact sheet describing Profiles and highlighting key
 2016 results
 - a PowerPoint presentation that presents state results, by quartiles, on a U.S. map
 - o all questionnaires and item rationales
 - o information on how to obtain Profiles datasets
 - o technical documentation for data analysis





State Highlights

- The Tennessee Department of Education with help from the Tennessee Department of Health provided professional development on physical education standards, assessment using technology, and curriculum mapping/pacing to the Grundy County, Metropolitan Nashville, Fayetteville, Marion County, and Carter County school districts. Over 300 teachers were trained with the potential to impact 98,458 students. As a result of the training:
 - New physical education standards were implemented this year.
 - <u>Plickers</u>, an online assessment tool, was introduced to teachers to use in their classrooms.
 - Pacing guides were created and shared as a starting point for helping districts map out the new standards.
 - State updates were given on the new physical activity law, Quality Physical Education Survey, and policy changes.
- Partners at the Florida Department of Education are developing a Florida
 Department of Health Healthy Schools Resource Guide that includes all resources for recess and physical activity during school from national partners such as the CDC, SHAPE America, and Action for Healthy Kids. This guide is a working document with three main components (modeled after 1305 project with priority school districts): physical activity, nutrition, and employee wellness. The guide will be posted on the Florida Department of Health website and disseminated to targeted school districts.
- The New York State Department of Health's Creating Healthy Schools and Communities program (CHSC) is designed to increase demand for and access to healthy, affordable foods and opportunities for daily physical activity in high-need school districts and their communities. In spring 2017, approximately 76 school districts and 225 school staff received the Alliance for a Healthier Generation (AHG) "Make the Grade with Wellness Policy" training in preparation for the 2017-18 school year.

NGO Highlights

In collaboration with CDC Healthy Schools, the National Network of Public Health
Institutes (NNPHI) Springboard to Active Schools team has released two new data
briefs. The briefs focus on implementing recess and on physical education (PE) in
schools. These data briefs highlight national data that describe the state of recess and
PE in schools and identify key policies and practices that school districts and schools can
use to promote these activities.



HHS-18-0191-A-000878



Help encourage healthy behaviors for adolescents and healthy environments for schools! Visit our <u>Multimedia</u> web page to embed this web badge on your websites and social media.

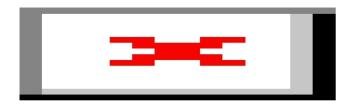


CDC Healthy Schools focuses on the well-being of children, teens, and adults in schools and develops effective tools and recommendations to ensure students are healthy and ready to learn. To achieve this goal, we support state and local education and health agencies and national organizations to implement school health policies and practices. For more information, please visit https://www.cdc.gov/healthyschools/index.htm.

Sender:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
Recipient:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
Sent Date:	2017/11/06 13:41:10
Delivered Date:	2017/11/06 13:43:21



From:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
To:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
Subject:	CDC Healthy Schools Highlights - March 5, 2018
Date:	2018/03/05 10:45:10
Priority:	Normal
Туре:	Note



CDC Healthy Schools: Healthy Students, Ready to Learn

Centers for Disease Control and Prevention (CDC) March 5, 2018

CDC Healthy Schools Highlights



Help Your Child Be Successful At School After A TBI CDC Announcements

 CDC recently released a "Report to Congress on The Management of Traumatic Brain Injury (TBI) in Children." The Report details the impact a TBI can have on children and their families and provides steps that can be taken to improve the care for children following a TBI. The Report and a tailored fact sheet for schools can be found here.



teacher talking to students about the importance of a healthy
 breakfast March 5th -9th is National School Breakfast Week.

 Federal school meal programs, like the School Breakfast Program,
 meet nutrition requirements that include more fruits, vegetables,
 whole grains, and decrease the amount of sodium and trans fat in
 meals. School breakfast provides the nutrients children need to
 start their day and perform better at school. Information on the benefits of school meal
 programs is available on the CDC Healthy Schools website.

State Highlights

Alaska

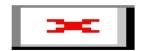
USDA School Meals Salads Wellness teams in Alaska are taking steps to reduce sugary drinks at school and their health effects. North Slope Borough School District passed a school wellness policy exceeding federal requirements stating that sodas and other carbonated beverages will no longer be allowed on their elementary and middle school campus during school hours.



In support of the "Stop the Pop" campaign, players on the Barrow High School football and volleyball teams decided to stop drinking soda during the season. This expanded to their booster club's decision to stop selling soda at after-school sporting events. The effort has now become a school district policy, designating entire school buildings as "soda-free." This <u>blog post</u> highlights the District's success.



Understanding the Training of Trainers Model





Are you a master trainer in charge of state or district-wide professional development? Are you looking to build a pool of other competent trainers who can effectively deliver course material and expand the reach of your trainings?

The CDC Healthy Schools' "Understanding the Training of Trainers (ToT) Model" gives the foundation that is needed. This <u>brief</u> helps those who are in charge of state and district-wide trainings to further their understanding of the ToT model. The ToT model is intended to engage master trainers in coaching new trainers who are less experienced with a particular topic or skill, or with training overall. For more in-depth understanding of the process, visit the "How to Build a Training Cadre" section and other helpful resources on this page, https://www.cdc.gov/healthyschools/trainingtools.htm.

CDC Healthy Schools focuses on the well-being of children, teens, and adults in schools and develops effective tools and recommendations to ensure students are healthy and ready to learn. To achieve this goal, we support state and local education and health agencies and national organizations to implement school health policies and practices. For more information, visit https://www.cdc.gov/healthyschools/index.htm.

Sender:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
Recipient:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
Sent Date:	2018/03/05 10:43:31
Delivered Date:	2018/03/05 10:45:10



From:	Nixon, Emmett (HHS/OASH)
То:	Perrotte, Brittany (HHS/OASH)
CC:	Smith, Adrienne M. (OS/OASH)
Subject:	FW: iGIANT
Date:	2017/01/26 12:00:13
Priority:	Normal
Туре:	Note

FYI. (Please see info below).

Emmett J. Nixon Staff Assistant



OWH_25thLogo_Final_Color

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: Emmett.Nixon@hhs.gov

Main: 202-690-7650 | Direct: 202-260-2845

Fax:202-205-0626

Websites: www.girlshealth.gov | www.girlshealth.gov | <a href="www.girlsh

 $\textbf{From:} \ smark@solamedsolutions.com \ [mailto:smark@solamedsolutions.com]$

Sent: Wednesday, January 25, 2017 5:16 PM

To: Nixon, Emmett (HHS/OASH)

Subject: iGIANT

Emmett-the fact sheet and volunteer PD is attached. Hope to have www.igiant.org up and running by the week's end. Please send out far and wide next week (after we get the website up).

Thanks! Sara

Saralyn Mark, MD President SolaMed Solutions, LLC 202-230-4101



smark@solamedsolutions.com

www.solamedsolutions.com www.stellarmedicine.com

www.stenarmedicine.com		
Sender: Nixon, Emmett (HHS/OASH)		
Recipient:	Perrotte, Brittany (HHS/OASH) ; Smith, Adrienne M. (OS/OASH)	
Sent Date:	2017/01/26 12:00:13	



From:	Leggin, Brooke (HHS/OWH) Collins Sharp, Beth (OS/OASH/OWH/DPI)
To:	Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3162cd18b6fe4e3f894fd7ff80c0e17d-CollinsShar>; Smith, Adrienne M. (OS/OASH) ; Bishop-Crawford, Jennifer (OS/OASH)
Subject:	RE: Fact Sheets & Content Areas for Alan & Sayeedha review
Date:	2017/05/31 11:23:57
Priority:	Normal
Туре:	Note

Yes, we were going on that assumption, it's just that Sayeedha's list had gotten very long in a short time.

From: Collins Sharp, Beth (OS/OASH/OWH/DPI) Sent: Wednesday, May 31, 2017 11:17 AM

To: Smith, Adrienne M. (OS/OASH); Bishop-Crawford, Jennifer (OS/OASH); Leggin, Brooke (HHS/OWH)

Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review

(b)((5)			

From: Smith, Adrienne M. (OS/OASH)
Sent: Wednesday, May 24, 2017 10:09 AM

To: Bishop-Crawford, Jennifer (OS/OASH); Leggin, Brooke (HHS/OWH); Collins Sharp, Beth

(OS/OASH/OWH/DPI)

Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review

11			
(b)(5)			
(2)(0)			

From: Bishop-Crawford, Jennifer (OS/OASH) **Sent:** Tuesday, May 23, 2017 3:25 PM

To: Leggin, Brooke (HHS/OWH); Collins Sharp, Beth (OS/OASH/OWH/DPI); Smith, Adrienne M.

(OS/OASH)

Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review

Hi Ladies, b)(5)
b)(5)

Please let me know if this is a realistic approach to this problem. Best,



Page 886 Withheld pursuant to exemption

(b)(5)

of the Freedom of Information and Privacy Act



b)(5)
Thanks,
Brooke
From: Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent: Friday, May 12, 2017 9:31 AM
To: Bishop-Crawford, Jennifer (OS/OASH); Smith, Adrienne M. (OS/OASH)
Cc: Leggin, Brooke (HHS/OWH)
Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review
Subject: Re. Fact Sheets acontent Areas for Alan asayeeuna review
b)(5)
From: Bishop-Crawford, Jennifer (OS/OASH)
Sent: Thursday, May 11, 2017 3:20 PM To: Collins Sharp, Both (OS/OASH/OWH/DPI): Smith, Adrienne M. (OS/OASH)
To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Smith, Adrienne M. (OS/OASH)
Cc: Leggin, Brooke (HHS/OWH)
Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review
The real question is whether or not that is possible? If so can we set some guidelines as to the
turnaround time for these documents?
Jenn
Jenni
= 0 0 0 0 0 0 0 0 0 0
Erami Calling Chara Both (ACIAACH/AMH/ADIA
From: Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent: Thursday, May 11, 2017 3:20 PM
Sent: Thursday, May 11, 2017 3:20 PM To: Bishop-Crawford, Jennifer (OS/OASH); Smith, Adrienne M. (OS/OASH)
Sent: Thursday, May 11, 2017 3:20 PM To: Bishop-Crawford, Jennifer (OS/OASH); Smith, Adrienne M. (OS/OASH) Cc: Leggin, Brooke (HHS/OWH)
Sent: Thursday, May 11, 2017 3:20 PM To: Bishop-Crawford, Jennifer (OS/OASH); Smith, Adrienne M. (OS/OASH)
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Sent: Thursday, May 11, 2017 3:20 PM To: Bishop-Crawford, Jennifer (OS/OASH); Smith, Adrienne M. (OS/OASH) Cc: Leggin, Brooke (HHS/OWH)

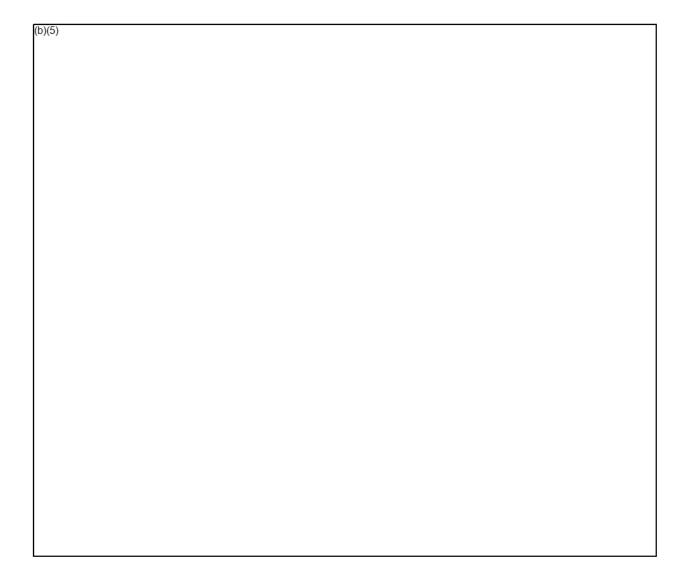


Sent: Thursday, May 11, 2017 2:02 PM To: Collins Sharp, Beth (OS/OASH/OWH/DPI); Smith, Adrienne M. (OS/OASH)
Cc: Leggin, Brooke (HHS/OWH)
Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review
(b)(5)
Best, Jenn
Jenn
From: Collins Sharp, Beth (OS/OASH/OWH/DPI)
Sent: Thursday, May 11, 2017 1:09 PM Tot Loggin Procks (HHS/OWH): Smith Adrianna M (OS/OASH)
To: Leggin, Brooke (HHS/OWH); Smith, Adrienne M. (OS/OASH) Cc: Bishop-Crawford, Jennifer (OS/OASH)
Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review
(b)(5)
From: Leggin, Brooke (HHS/OWH) Sent: Monday, May 08, 2017 10:24 AM
To: Smith, Adrienne M. (OS/OASH); Collins Sharp, Beth (OS/OASH/OWH/DPI)
Cc: Bishop-Crawford, Jennifer (OS/OASH)
Subject: RE: Fact Sheets &Content Areas for Alan &Sayeedha review
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(5)	
From: Bishop-Crawford, Jennifer (OS/OASH)	
Sent: Friday, May 05, 2017 4:12 PM	
Sent: Friday, May 05, 2017 4:12 PM To: Smith, Adrienne M. (OS/OASH); Collins Sharp, Beth (OS/OASH/OWH/DPI)	
Sent: Friday, May 05, 2017 4:12 PM To: Smith, Adrienne M. (OS/OASH); Collins Sharp, Beth (OS/OASH/OWH/DPI) Cc: Leggin, Brooke (HHS/OWH)	
Sent: Friday, May 05, 2017 4:12 PM To: Smith, Adrienne M. (OS/OASH); Collins Sharp, Beth (OS/OASH/OWH/DPI)	
Sent: Friday, May 05, 2017 4:12 PM To: Smith, Adrienne M. (OS/OASH); Collins Sharp, Beth (OS/OASH/OWH/DPI) Cc: Leggin, Brooke (HHS/OWH) Subject: FW: Fact Sheets &Content Areas for Alan &Sayeedha review	
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Brooke Leggin

Web and Community Manager



OWH_logo_150

Office on Women's Health U.S. Department of Health and Human Services 200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

E-mail: brooke.leggin@hhs.gov Work Hours: 7:30 am to 4:00 pm ET

Main: 202-690-7650 | Direct: M, Th, F 202-205-2373 T, W 301-864-2607



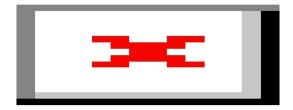
Websites: www.womenshealth.gov | www.girlshealth.gov OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov Connect with us on: Twitter | Facebook | YouTube

Sender:	Leggin, Brooke (HHS/OWH)
Recipient:	Collins Sharp, Beth (OS/OASH/OWH/DPI) ; Smith, Adrienne M. (OS/OASH) ; Bishop-Crawford, Jennifer (OS/OASH)
Sent Date:	2017/05/31 11:23:56
Delivered Date:	2017/05/31 11:23:57



From:	APHA Center for School, Health and Education <apha@apha.org></apha@apha.org>	
То:	Smith, Adrienne M. (OS/OASH)	
Subject:	[MARKETING EMAIL]New Case Studies on School-based Health Centers	
Date:	2018/02/15 13:02:56	
Priority:	ormal	
Туре:	Note	

If you are unable to view the message below, view it on our website.



CSHE Email Header-Yellow

Dear Adrienne.

As one of the places where children and adolescents spend most of their time, schools have the opportunity to improve health, connect students to needed resources and health care, and help them graduate on time. The Center for School, Health and Education is working with school-based health centers to coordinate the efforts of schools and service providers in schools to best serve students.

One way school-based health centers, or SBHCs, can improve health and help students graduate on time is by taking part in health reform efforts. Many health reform initiatives are focused on cross-sector collaboration and address the non-clinical needs of

Learn more about how SBHCs can take part in health reform:

- Opportunities for Policymakers
- Opportunities for SBHC Sponsors
- SBHC Fact Sheet [Template]
- Resources for



patients. SBHCs can be valuable partners in the reform process because, in addition to providing health care, they can serve as a hub for social and educational services in schools. Rather than just providing primary care, SBHCs can link the children and adolescents they serve to mental health care providers, nutrition services, benefits counselors, and a wide range of other services. Overall, SBHCs recognize that health is shaped by a variety of factors outside clinic walls and that collaboration with other providers is needed to improve health.

In honor of National School-Based Health Care Awareness Month, we are sharing how SBHCs across the country are developing innovative strategies and partnerships to provide care for the young people they serve. The Center for School, Health and Education has developed case studies that highlight SBHCs across the country. These case studies describe ways SBHCs are using telehealth to connect students to health care providers, how SBHC sponsors can help individual centers take part in health reform efforts, and how SBHCs are working to address the social determinants of health. All of the case studies describe how collaborations between SBHCs and other providers can improve student health. We hope that you share these resources and learn more about how SBHCs can leverage health reform efforts to improve the health and educational success of their students.

Sincerely,



Jason Coates
Policy Analyst
American Public Health Association
CSHE@apha.org

Jason Coates

Advocacy

Learn more about National School-Based Health Care Awareness Month on Twitter using#SBHCmonth18



Home | About APHA | Join APHA | Advocacy | APHA Meetings | Donate | Publications

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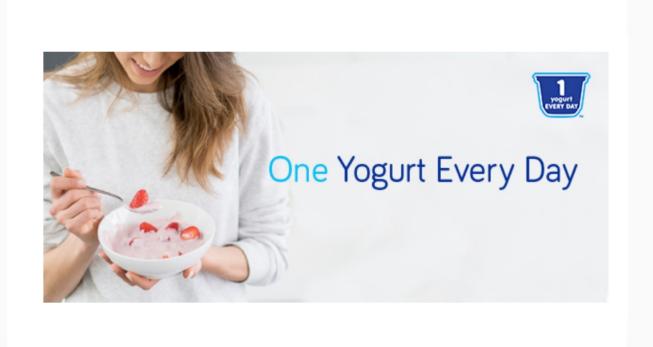
powered by Blackbaud nonprofit software

Sender:	Sender: APHA Center for School, Health and Education <apha@apha.org></apha@apha.org>		
Recipient:	Smith, Adrienne M. (OS/OASH)		
Sent Date:	2018/02/15 13:02:06		
Delivered Date:	2018/02/15 13:02:56		



From:	One Yogurt Every Day <info@oneyogurteveryday.com></info@oneyogurteveryday.com>		
То:	To: Smith, Adrienne M. (OS/OASH)		
Subject:	ject: [MARKETING EMAIL]New Opportunities: CACFP Meal Patterns and Child Food Experiences		
Date:	Date: 2017/09/21 15:24:37		
Priority:	Normal		
Туре:	Note		

View this email in your browser





OYED SEPTEMBER 2017

New CACFP Meal Patterns to be Implemented by October 1

Dear Adrienne,

The USDA's Child and Adult Care Food Program (CACFP) includes aid to more than four million U.S. children in family or group day care homes, child care centers and afterschool programs. USDA recently revised the CACFP meal patterns to help ensure access to healthy, balanced meals throughout the day for this vulnerable population. The updated patterns, that must be in place by October 1, 2017, include a greater variety of vegetables and fruits, more whole grains, and less added sugar and saturated fat.

There is an opportunity for public health nutrition professionals implementing the new CACFP meal patterns to elevate attention to nutrition literacy as a foundational part of a child's early learning experiences. Elevating attention to nutrition literacy can help bring focus on improving how children obtain, process and understand basic nutrition information and what experiences they need to help make appropriate nutrition decisions. For example, exposure to nutrition literacy and healthy dietary patterns can be reinforced with positive, fun food prep experiences, and by greater awareness to portion size.

Engaging young children in food preparation encourages creative experiences with a variety of food groups as illustrated in MyPlate. It also provides an opportunity to help children enjoy the experience of preparing and eating nutrient dense food combinations such as pairing fruits or vegetables with yogurt. In addition, the USDA's Farm to Child Nutrition Programs planning guide provides ideas to help providers plan engaging nutrition education and curriculum experiences for their clients. The National Farm to School Network has resources including a Roadmap for Early Care and Education that can help parents, caregivers and educators get started on their journey toward elevating nutrition literacy.

The degree to which portion size should change for young children as they grow can also be reinforced. When it comes to portion size,

Learn more about the health benefits of yogurt by following One Yogurt Every Day on Twitter. Stay connected for access to news, resources and announcements, and tweet at us to let us know what you want to hear more about.



One Yogurt Every Day







@YogurtEveryDay



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Sende	Sender: One Yogurt Every Day <info@oneyogurteveryday.com></info@oneyogurteveryday.com>		
Recipien	Smith, Adrienne M. (OS/OASH)		
Sent Date	Sent Date: 2017/09/21 15:23:40		
Delivered Date	2017/09/21 15:24:37		



From:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
Subject:	New CDC Resources on School Health Services and the Management of Chronic Health Conditions
Date:	2017/05/10 09:18:16
Priority:	Normal
Туре:	Note



CDC Healthy School Banner

May 10, 2017

Dear CDC School Health Partners:

We are continuing to strengthen our work to provide you with translation tools to support the implementation of school health priorities in your states. We are pleased to share with you new resources on the role of school health services in the management of chronic health conditions. As you know, school health services is one of the key components of the Whole School, Whole Community, Whole Child (WSCC) model. An important role of health services is the facilitation of access or referrals by linking school staff, students, families, community, and health care providers together to promote the health care of students in the school environment.

In efforts to help students complete each day at school, healthy, safe and ready to learn, we have added new information to the CDC Healthy Schools website on acute and emergency care, care coordination, family engagement, and chronic disease management in schools. New resources are now available that give evidence-based strategies schools can use to manage



chronic health conditions and that focus on the relationship between chronic health conditions and academic achievement.

- "Addressing the Needs of Students with Chronic Health Conditions" is a research
 brief that provides several strategies and activities schools and school districts can use
 to focus on the needs of students with chronic health conditions. It is based on a CDC
 systematic literature review on the role of school health services as well as guidelines
 and position statements from national organizations with a focus on school health.
- "Chronic Health Conditions and Academic Achievement" is a research brief that
 describes the relationship between students' chronic health conditions and their
 academic achievement, based on a review of the scientific literature. It reports current
 knowledge about the associations between five chronic health conditions (seizure
 disorders/epilepsy, asthma, diabetes, poor oral health, and food allergies) and academic
 performance in areas such as cognitive skills, attendance, grades, and test scores.
- Two new fact sheets have also been added to our site. "Managing Chronic
 Conditions in Schools: The Role of the School Nurse" explains the importance of the
 school nurse and gives three main roles school nurses often play in managing chronic
 health conditions. The "Health Insurance for Children: How Schools Can Help" fact
 sheet provides schools with guidance on how to improve educational outcomes of
 students by connecting them to health insurance.

Additionally, we recently published a systematic review of literature in the <u>Journal of School Nursing</u> on how direct access to school nursing and other health services improves the health and academic outcomes of students with chronic health conditions. CDC's National Asthma Control Program has also released a compilation of resources, <u>"Strategies for Addressing Asthma in Schools"</u>, to assist with school personnel planning or maintaining an asthma management program.

We hope that you can use these resources in training and technical assistance with your districts and schools. Please contact us if you have any questions about this information and materials.

Thank you.

Holly Hunt

Holly Hunt, Chief School Health Branch Division of Population Health National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) CDC 770-488-6103



http://www.cdc.gov/healthyschools/

Sender:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
Recipient:	CDC Healthy Schools (CDC) <cdchealthyschools@cdc.gov></cdchealthyschools@cdc.gov>
Sent Date:	2017/05/10 09:17:38
Delivered Date:	2017/05/10 09:18:16



From:	Society for Public Health Education <info@sophe.org></info@sophe.org>
То:	Smith, Adrienne M. (OS/OASH)
Subject:	News U Can Use April 17, 2017
Date:	2017/04/17 10:33:06
Priority:	Normal
Туре:	Note





April 17, 2017

March for Science

EACH

Careers

Resources

Advocacy

SOPHE Marches for Science

Take Action!

Science impacts health

Webinars

Publications







#MarchforScience

As we know, science and research are imperative to the work we do and best practices we follow. SOPHE stands for science and community engagement efforts that emphasize the necessity to safeguard our health, and for this proudly supports the March for Science will be held in Washington, DC on Saturday, April 22. Local marches are held march in satellite locations; find a march near you.

This global movement is fundamental to health advocacy, which has been tested now more than ever with the current administration. There is a public need to protect our health via policymaking, science education and research, which are all being threatened. Funding to agencies, such as CDC and NIH, that forward health education and promote credible practices to follow make it clear to see understand the "...vital role science plays in our health, safety, economies, and governments."



EACH

Every Kid Healthy Week, April 24-28

Schools are a great place for children to begin learning about healthy eating, and parents play an important role in supporting nutrition in schools.

Learn more about what parents can do to support healthy school

meals: http://bit.ly/2mhQQ4u





Careers

Call for editor-in-chief for Health Promotion Practice

SOPHE seeks an <u>editor-in-chief</u> for its official peer-reviewed journal, Health Promotion Practice.

Health Promotion Practice seeking Associate Editors



Health Promotion Practice (HPP), an official journal of SOPHE is currently seeking <u>applications for Associate Editors</u> for our Tools of the Trade commentary section.

Resources

E-cigarette Use Among Youth & Young Adults: A Report of the Surgeon General

Recent findings from the Surgeon General's Report <u>E-Cigarette Use</u> <u>Among Youth and Young</u> <u>Adults</u> provide excellent resources and insight.



In the report, there is a new resource designed from health care providers: <u>Health Care Provider Conversation Card</u>. This resource is intended to help physicians, nurses, and other health care providers talk with their young patients about the risks of e-cigarettes.



Spanish Resources are also available in a Parent Tip Sheet &a Fact Sheet.

Gender pay gap

April 4, 2017 recognized Equal Pay
Day, <u>defined by the federal government</u> as
"the date in the current year that
represents the extra days a typical woman
working full-time would have to work just
to make the same as a typical man did in
the previous year."



To learn more about equality and opportunity for women and families, National Women's Law Center provides <u>resources for a fair workplace</u> along with other information available state by state.

Every Kid Healthy Week infographic

It's Every Kid Healthy Week! Did you know that being physically active can help students focus in school? Learn more with the Burn to Learn infographic: http://bit.ly/2mx2JE5

Learn how more than 120 afterschool programs in Boston, Massachusetts, created environments promoting healthy eating and physical activity. http://bit.ly/2ahVgzM





Advocacy

Comments open for CDC Worksite Health ScoreCard

CDC invites comments on the <u>proposed rule to update the CDC Worksite</u>
<u>Health ScoreCard (HSC)</u> due May 1. The <u>HSC</u> is a tool to help employers
assess whether they have implemented evidence-based health promotion
interventions or strategies in their worksites to prevent heart disease,
stroke, and related conditions such as hypertension, diabetes, and obesity.

Take Action!

Have you read your nutrition label lately?

The American Heart Association's Salt Reduction Initiative and #BreakUpWithSalt Campaign, urges the food industry to lower the amount of sodium and other unhealthy ingredients during the processing of products. Additionally, consumers are called



life is why™

to <u>take a stance against unhealthy ingredients</u> by writing to the CEOs of food companies and restaurants.



RWJF Preparedness Innovator Challenge

How are you using the National Health
Security Preparedness Index to ready your community for an emergency? The new Preparedness Innovator Challenge hosted by the Robert Wood Johnson Foundation (RWJF) and the University of Kentucky



wants to hear what you are doing or what you plan to do to improve preparedness, health security, and resilience against disaster in your community.

Has use of the Index In your community sparked conversations with community leaders? Are you using Index data to identify preparedness gaps?

The Preparedness Innovator Challenge is an opportunity for you to help your colleagues by sharing how the Index is helping your community prepare for the unexpected. Teams or individuals with an interest in improving health security and preparedness are invited to apply.

Additional information is available. Deadline: July 31, 2017

Webinars

Webinar: HPV Vaccinations: From Recommendations to Practice

Wednesday, April 19 | 12:00 p.m. - 1:00 p.m. EDT

Hosted by the National Foundation for Infectious Diseases



Human papilloma viruses (HPV) cause over 31,000 cases of cancer in the U.S. each year. Join the NFID president-elect Joseph A. Bocchini, Jr., MD, professor and chair of the Department of Pediatrics Health Sciences Center



at Louisiana State University and Tracy Bieber, RN, BSN, Immunization Strategy Manager at Sanford Health System for an update on current Advisory Committee on Immunization Practices (ACIP) recommendations regarding the use of HPV vaccines and strategies for improving immunization rates.

Webinar: <u>Education and Health: The Role of Mayors and City Leaders to Ensure Kids are Healthy and Ready to Learn</u>

Wednesday, April 19 | 2:00 p.m. - 3:30 p.m. EDT
Hosted by the National League of Cities



How well we live and how long we live is determined by more than just our genetics. It is also significantly influenced by the factors around us including access to quality education. Research shows that better-educated individuals live longer, healthier lives than those with less education. Join this webinar to explore the links between education and health and the role of city leaders in this work. Representatives from Philadelphia and Minneapolis will highlight current efforts to improve the connection between health and education in their cities.

Webinar: Public Health & Early HIV Detection

Thursday, April 20 | 1:00 p.m. - 2:00 p.m. EDT Hosted by Systems for Action

Systems for Action
Systems and Services Research to Build a Culture of Health

Join Deborah Porterfield, MD, MPH & Christine A. Bevc, PhD, MA as they



present the webinar titled "Integrating Health Care & Public Health to Improve HIV Early Detection and Control."

Webinar: Exploring Community-Wide Interventions That Have Health Impact in 5 Years (HI-5)

Wednesday, April 26 | 1:00 p.m. - 2:00 p.m. EDT



Hosted by the Centers for Disease Control and Prevention

The Centers for Disease Control and Prevention's (CDC) Health Impact in Five Years or HI-5 (high-five) initiative, highlights a list of non-clinical, community-wide approaches with a proven track record. This webinar highlights specific interventions identified in the HI-5 Initiative and will provide stakeholders with the opportunity to hear real world examples of how local and state-level organization shave expanded public transportation to meet needs of their communities.

SOPHE Publications

SOPHE's resources are just a click away

SOPHE's website has a new look, and user-friendly member access to



publications. Browse through the three premier peer-reviewed journals to learn more about top public health issues including:

- social marketing
- health literacy
- health disparities
- environmental health
- tobacco prevention and control programs





Save the Date!

19th Annual Health Education Advocacy Summit
October 21 - 23, 2017
Washington Court Hotel
Washington, D.C.







Website | Membership | Contact







Society for Public Health Education, 10 G Street, NE, Suite 605, Washington, DC 20002

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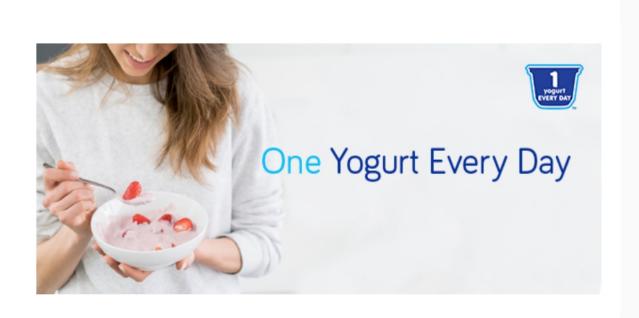
Try it free today

Sender:	Society for Public Health Education <info@sophe.org></info@sophe.org>
Recipient:	Smith, Adrienne M. (OS/OASH)
Sent Date:	2017/04/17 10:32:11
Delivered Date:	2017/04/17 10:33:06



From:	One Yogurt Every Day <info@oneyogurteveryday.com></info@oneyogurteveryday.com>
SentVia:	One Yogurt Every Day <info=oneyogurteveryday.com@mail178.suw18.rsgsv.net></info=oneyogurteveryday.com@mail178.suw18.rsgsv.net>
То:	Smith, Adrienne M. (OS/OASH)
Subject:	[MARKETING EMAIL]PHA's Building a Healthier Future Summit Showcases Dannon Accomplishments
Date:	2017/05/17 14:11:00
Priority:	Normal
Туре:	Note

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OYED MAY 2017

Dear Adrienne,

Annual PHA Summit Highlights Dannon Nutrition Commitment Accomplishments

The Partnership for a Healthier America's annual summit this month marked a significant milestone for Dannon, having met and, in some cases, surpassed its commitment to improve the nutrient profile and nutrient density of its products, and invest more than \$3 million in nutrition research and education.

Below is a recap of Dannon's commitments and accomplishments since beginning these efforts in 2013:



achieved these goals by reformulating popular products like **Danimals®** Smoothies and by introducing new ones like the popular Oikos® Triple Zero Greek Nonfat yogurt - containing zero added sugars¹, zero artificial





Learn more about the health benefits of yogurt by following One Yogurt Every Day on Twitter. Stay connected for access to news, resources and announcements, and tweet at us to let us know what you want to hear more about.



One Yogurt Every Day







@YogurtEveryDay



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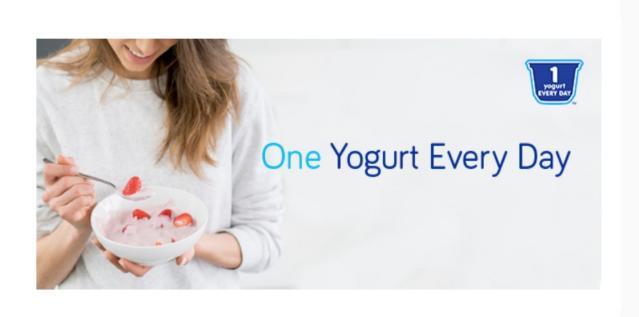
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	Recipient:	Smith, Adrienne M. (OS/OASH)
	Sent Date:	2017/05/17 14:10:34
ı	Delivered Date:	2017/05/17 14:11:00



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SentVia:	One Yogurt Every Day <info=oneyogurteveryday.com@mail92.atl11.rsgsv.net></info=oneyogurteveryday.com@mail92.atl11.rsgsv.net>
То:	Smith, Adrienne M. (OS/OASH)
Subject:	[MARKETING EMAIL]Nutrition Community to Encourage Variety this National Nutrition Month
Date:	2017/03/20 10:44:01
Priority:	Normal
Туре:	Note

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OYED MARCH 2017

Dear Adrienne.

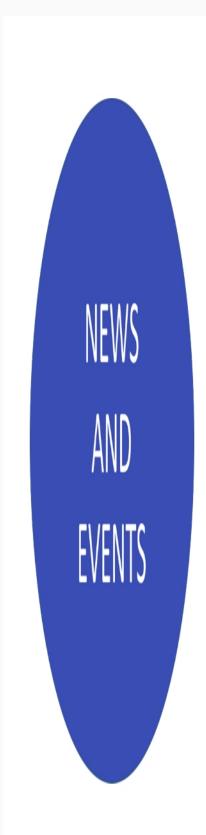
For this year's National Nutrition Month® theme, the Academy of Nutrition and Dietetics and its members are encouraging people to "Put Your Best Fork Forward" – a concept meant to signify that each bite counts. It's a reminder that each small shift toward better eating habits makes an impactful difference in the long run – ultimately promoting lifelong healthy eating patterns.

One of the hallmarks of Put Your Best Fork Forward is increasing variety in the diet by not only getting the recommended amount of foods in each food group but also making sure to incorporate a wide array of foods and beverages within those groups. As the Academy notes in a toolkit, variety helps ensure you're getting all the nutrients needed to stay healthy. So, instead of just recommending people consume more fruits and vegetables, reminding them to select different varieties like dark leafy greens and red and yellow peppers is also important. Yogurt, too, can help bring more variety to the dairy group.

Research indicates that there are additional benefits to eating a more varied diet. In one analysis of National Health and Nutrition Examination Survey (NHANES) data, a wide-ranging diet of healthful food was inversely associated with adiposity indicators in men and women. Among women, the odds of obesity of those with the most varied diet of healthful foods were 31-44% lower than those with the least varied diet. Among men, the odds of obesity were nearly 50% lower when comparing those with the most varied diet to those with the least. The authors concluded that increasing variety in some food categories may be an effective strategy for weight control. A second study revealed that a greater mix of healthful food was associated with lower odds of metabolic syndrome. ²

The Academy stresses the importance of proactively identifying ways to vary meals – experimenting with different vegetables, switching to whole grain breads and cereals, substituting for plant-based proteins, sweetening plain low-fat yogurt with healthier toppings, among other suggestions.³

Putting Your Best Fork Forward should mean eating nutrient-rich and delicious foods. Together we can take a bite in the right direction.





Learn more about the health benefits of yogurt by following One Yogurt Every Day on Twitter. Stay connected for access to news, resources and announcements, and tweet at us to let us know what you want to hear more about.



One Yogurt Every Day







@YogurtEveryDay



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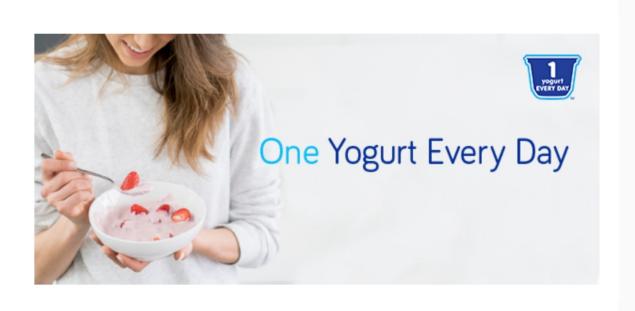
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Recipient:	Smith, Adrienne M. (OS/OASH)
Sent Date:	2017/03/20 10:36:35
Delivered Date:	2017/03/20 10:44:01



From:	One Yogurt Every Day <info@oneyogurteveryday.com></info@oneyogurteveryday.com>
То:	Smith, Adrienne M. (OS/OASH)
Subject:	[MARKETING EMAIL]Introducing DanoneWave
Date:	2017/11/30 16:29:50
Priority:	Normal
Туре:	Note

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Yogurt...and beyond

Dear Adrienne,

You may have heard that Danone, the parent company of Dannon, acquired WhiteWave Foods and we wanted to take a minute to share some thoughts on what this means as we begin to wrap up 2017 and prepare for a new year.

Dannon, as part of Danone, is anchored in a mission to bring health through food to as many people as possible. Whether through topics such as the Dietary Guidelines for Americans, WIC, CACFP, school nutrition, health equity, gut health and nutrition across the lifespan, we have worked to elevate and share issues that address challenges and opportunities for Americans to achieve health through food, while also working to improve the portfolio of foods we offer to consumers.

For example, in 2017 we marked a milestone of meeting and in some cases surpassing a commitment to the Partnership for a Healthier America to improve the nutrient profile and nutrient density of Dannon products. In addition, we delivered an investment of more than \$3 million over three years in nutrition research and education.

Now as DanoneWave, we are proud to bring together our portfolios of dairy and plant-based products including yogurt and premium dairy





Learn more about the health benefits of yogurt by following One Yogurt Every Day on Twitter. Stay connected for access to news, resources and announcements, and tweet at us to let us know what you want to hear more about.



One Yogurt Every Day







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Recipient:	Smith, Adrienne M. (OS/OASH)
Sent Date:	2017/11/30 16:28:52
Delivered Date:	2017/11/30 16:29:50



From:	ChangeLab Solutions <info@changelabsolutions.org></info@changelabsolutions.org>
То:	Smith, Adrienne M. (OS/OASH)
Subject:	DRAFT - California bans marketing of unhealthy foods in schools!
Date:	2017/10/16 16:50:51
Priority:	Normal
Туре:	Note



AB 841 makes California one of the first states to pass legislation addressing the marketing of unhealthy foods to school children

California bans marketing of unhealthy foods in



schools!

California Governor Jerry Brown has signed Assembly Bill 841, which prohibits schools from marketing foods that cannot be sold or served in those schools. The addition to the state education code is based on the idea that unhealthy foods that may not be served to students should not be advertised to them, either. The law also prohibits schools from participating in corporate incentive programs that reward students with free or discounted foods or beverages that do not comply with applicable nutritional standards such as the USDA Smart Snacks in School regulations.

Marketing of junk food to children is big business. The Federal Trade Commission has reported that companies spend \$149 million annually on food marketing in schools. Such marketing adversely affects students' eating habits, which are tied to their health and their academic success. Type 2 diabetes in children is becoming more common, especially in overweight teens. And the 2009 National Youth Risk Behavior Survey found that students who received higher grades were significantly less likely to engage in behaviors such as drinking soda or pop.

AB 841 was substantially based on a model policy created by ChangeLab Solutions. The passage of AB 841 makes California one of the first states to pass legislation addressing the marketing of unhealthy foods to children in schools. This law will help ensure that students receive consistent messages from their schools about the importance of proper nutrition as well as reinforce parents' efforts to help their children choose healthy foods. In addition, helping students make healthy food choices will result in healthier students who are better able to thrive academically.

ChangeLab Solutions has created a <u>fact sheet</u> on restricting unhealthy food marketing in schools as well as model policies with language for <u>district-level policies</u> and <u>state-level statutes</u> that can be tailored to the needs of particular jurisdictions and then adopted by school boards, state boards of education, or state legislatures. Contact us to <u>learn more</u> about how to regulate marketing of unhealthy foods to children in your schools.





ChangeLab Solutions creates healthier communities for all through better laws and policies. Check out <u>Tools for Change</u>, our resource catalog, for an overview of what we offer on our website. With your <u>help</u>, we can make healthy changes in every community. <u>Contact us</u> to learn how you can get involved!

ChangeLab Solutions | www.changelabsolutions.org | (510) 302-3380

Images: ChangeLab Solutions, Lydia Daniller

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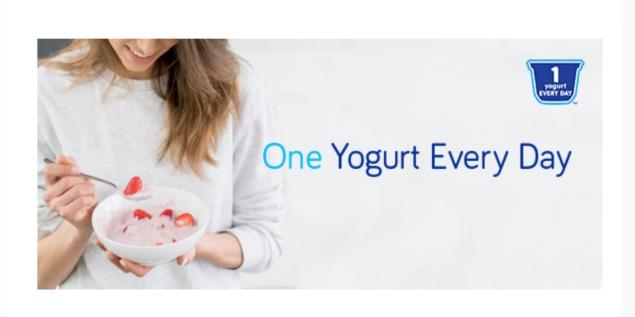
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Sender:	ChangeLab Solutions <info@changelabsolutions.org></info@changelabsolutions.org>
Recipient:	Smith, Adrienne M. (OS/OASH)
Sent Date:	2017/10/16 16:48:58
Delivered Date:	2017/10/16 16:50:51



From:	One Yogurt Every Day <info@oneyogurteveryday.com></info@oneyogurteveryday.com>	
SentVia:	One Yogurt Every Day <info=oneyogurteveryday.com@mail135.wdc02.mcdlv.net></info=oneyogurteveryday.com@mail135.wdc02.mcdlv.net>	
То:	Smith, Adrienne M. (OS/OASH)	
Subject:	Subject: [MARKETING EMAIL]How Yogurt Can Help Bridge the Health Equity Gap	
Date:	Date: 2017/04/21 12:56:24 Priority: Normal	
Priority:		
Туре:	Note	

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OYED APRIL 2017

Dear Adrienne,

Yogurt: A Bridge to Health Equity

When it comes to obesity in the United States, minority populations seem to be the hardest hit. According to an analysis by the Robert Wood Foundation, African American adults are nearly 1.5 times as likely to be obese compared to White adults. And more than 75 percent of African Americans are overweight or obese compared with 67.2 percent of White adults.¹

Unfortunately, overweight and obesity rates are also higher among African American children compared to white children. From 1999 to 2012, 35.1 percent of African American children between the ages 2 to 19 were overweight, compared to 28.5 percent of white children; and 20.2 percent were obese compared to 14.3 percent of white children.¹

Income, stable and affordable housing, access to quality education and a host of other factors influence a person's health status and longevity. These factors, what public health professionals recognize as "social determinants of health", contribute to higher rates of obesity and associated illness in African American communities.¹





Learn more about the health benefits of yogurt by following One Yogurt Every Day on Twitter. Stay connected for access to news, resources and announcements, and tweet at us to let us know what you want to hear more about.



One Yogurt Every Day







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Recipient: Smith, Adrienne M. (OS/OASH)	
Sent Date:	2017/04/21 12:51:45
Delivered Date:	2017/04/21 12:56:24



From:	Collins Sharp, Beth (OS/OASH/OWH/DPI) ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=3162CD18B6FE4E3F894FD7FF80C0E17D- COLLINSSHAR>
To:	Wasserman, Jill (OS/OPHS) ; Smith, Adrienne M. (OS/OASH)
Subject:	Re: OASH Weekly Report 2.28.2018: OWH
Date:	2018/03/01 17:30:03
Priority:	Normal
Туре:	Note

(b)(5)		

On: 28 February 2018 17:27, "Wasserman, Jill (OS/OPHS)"

<Jill.Wasserman1@hhs.gov>wrote:

Hi Beth – Please check your event below and LMK if anything needs to be updated. TY -Jill

From: Wasserman, Jill (OS/OPHS)

Sent: Wednesday, February 28, 2018 5:25 PM

To: 'Broido, Tara (HHS/)'

Cc: Bishop-Crawford, Jennifer (OS/OASH) (Jennifer.Bishop-Crawford@hhs.gov); Evans, Syreeta

(OS/OASH); 'Gianelli, Diane M (OASH)'; Greene, Nicole (OS/OASH); Kotwicki, Lauren

(HHS/OASH); Elizabeth Osborn; Tytel, Jessica (OS/OASH)

Subject: OASH Weekly Report 2.28.2018: OWH

Hi Tara -

Below are the tweets for @HHS_Health:

- RT of @womenshealth tweet about the Women's Mental Health workshop. https://twitter.com/womenshealth/status/967118874482302976
- #Eatingdisorders usually start during the teen years. Check out this info from @girlshealth on how to recognize the major signs &get help: http://go.usa.gov/x9E35.
 #NEDAwarenessWeek



Please send either one of the messages below after Wednesday, February 7 but no later than March 9

 National Women and Girls HIV/AIDS Awareness Day is approaching &we are sharing what every woman should know about HIV! Click here to find out more— https://go.usa.gov/xntm6 #NWGHAAD

Original Link: https://www.womenshealth.gov/nwghaad/



cid:image001.png@01D3B0B5.D4168090

March 10 is National Women and Girls HIV/AIDS Awareness Day! Here's what you
can do to support women and girls about HIV prevention: https://go.usa.gov/xntyg
#NWGHAAD

Original Link: https://www.womenshealth.gov/nwghaad/resources/ideas-observing-nwghaad



cid:image002.png@01D3B0B5.D4168090

***Post on March 10**

 Today is National Women and Girls HIV/AIDS Awareness Day! Click here to learn more about the day &how you can help spread the word about HIV prevention: https://go.usa.gov/xntyq #NWGHAAD

Original Link: https://www.womenshealth.gov/nwghaad/resources/fact-sheet



cid:image003.png@01D3B0B5.D4168090

Report is below.

Best,

Jill



Page 947 Withheld pursuant to exemption

(b)(5)

of the Freedom of Information and Privacy Act



Page 948 Withheld pursuant to exemption

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Page 949 Withheld pursuant to exemption

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Jill Lauren Wasserman, MPH

Health Education Specialist



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

200 Independence Avenue, SW, Washington, DC 20201

E-mail: Jill.Wasserman1@hhs.gov

Main: 202.690.7650 | Direct: 202.260.9275

Telework Days: Wednesdays & Fridays

Sender:	Collins Sharp, Beth (OS/OASH/OWH/DPI) ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=3162CD18B6FE4E3F894FD7FF80C0E17D- COLLINSSHAR>
Recipient:	Wasserman, Jill (OS/OPHS) ; Smith, Adrienne M. (OS/OASH)
Sent Date: 2018/03/01 17:30:01	
Delivered Date:	2018/03/01 17:30:03



From: UCLA Center for Health Policy Research <healthpolicy@ucla.edu></healthpolicy@ucla.edu>	
То:	Smith, Adrienne M. (OS/OASH)
Subject: Teen gender identity in California; CHIS in 2017; Kominski on tax bill, ACA repeal	
Date: 2017/12/13 12:17:20	
Priority: Normal	
Туре:	Note

SIGN UP FOR EMAILS





IN THIS EDITION:

27 percent of California adolescents are gender nonconforming, study finds

It is the first representative survey of the state's youth population to measure gender expression



A new UCLA study finds that 27 percent (796,000) of California's youth, ages 12 to 17, report they are viewed by others as gender nonconforming at school.

The study is based on 2015-2016 <u>California</u> <u>Health Interview Survey</u> (CHIS).



iStock.com/Stefano Tinti

The study also assessed differences in mental health among gender nonconforming youth and gender conforming youth in the state, and found no significant difference in the rates of lifetime suicidal thoughts and suicide attempts between gender nonconforming youth and their gender conforming peers. However, gender nonconforming youth were more than twice as likely to have experienced psychological distress in the past year.

Read the study

Read the press release

CHIS impacts in 2017



From soda tax bills to People Magazine, CHIS data was used widely



The <u>California Health Interview Survey</u> (CHIS), the nation's largest state health survey, continued to play a significant role in shaping health policies and guidelines of state and national importance in 2017.

Examples include providing background data on California prediabetes rates for an analysis of a state bill approving payment for continuous glucose monitors for Medi-Cal beneficiaries; providing supporting evidence for analysis of the health delivery system at a California Assembly Health Committee hearing; providing data on immigrant access to health during a state legislative briefing; and more.

Who else used CHIS 2017?

- Researchers who published studies on chronic illnesses, aging, immigrant health, insurance and more.
- Local governments that issued dozens of general and specialized reports.
- Health advocates who set up community databases and programs.
- Journalists whose stories ran in hundreds of media.

California Health Interview Survey

What has CHIS done in 2017?

From soda taxes to People Magazine, CHIS data was used widely

"California policymakers

have unusually detailed

data at their fingertips

thanks to the California

Health Interview Survey"

Politico

The <u>California Health Interview Survey</u> (CHIS) is the nation's largest state health survey and one of the largest health surveys in the United States.

Conducted by the <u>UCLA Center for Health</u> <u>Policy Research</u>, CHIS interviews more than 20,000 households each year and collects

health data on adults, teenagers and children to build a detailed picture of California's diverse population.

Current debate over health care reform makes the California Health interview Sunvey even more critical in its mission to provide objective, evidence-based data to lawmakers, advocates, researchers, the media and many more.

Legislation: Diabetes, soda tax, immigrant health, elder housing subsidies, ACA and

more

AB447 (Amendment that allows Medi-Cal to cover the cost of continuous plucose monitors): <u>Susan Babers</u>, co-director of the Center's <u>Chronic Disease Program</u>, provided data on diabetes for the Medi-Cal population to Assemblyman Adam Gray's office. Gray is coalwhor of the bill.

AB1003 (California Community Health fund): CHIS data on prediabetes were cited in analysis of the 2-cent-per-fluid-ounce tax on sugary beverages and soda proposed by Assemblyman Richard Bloom.

Health delivery hearing: In an Oct. 23 California Assembly Health Committee

hearing that examined the state's current health care system, <u>California Health Interview Survey</u> (CHIS) data and estimates from the Cennet's <u>CRISIM microsimulation model were used during testimony</u> by Ken Jacobs and Laurel Lucia of the UC Berkeley Center for Labor Research and Education.

Sacramento briefing: Center Associate Director Ninez Ponce presented CHS data at a <u>Inguistave briefing</u> to advance immigrant access to care. The briefing was hosted by the Asian & Pacific Islander Legislative

Caucus, Asian Health Services and others.

City of Santa Monica Elder subsidies; Santa Monica approved pilot project subsidies that will help 26 low-income elders stay in their homes, Subsidy amounts are based on the Center's <u>Elder Index</u>, which uses CHIS data in its calculations.

www.chisucla.edu



Read the 2017 CHIS fact sheet

AskCHIS 2017 stats at a glance

<u>AskCHIS©</u> and <u>AskCHIS NE©</u> are the Center's easy-to-use web query tools that give users free access to hundreds of geographically customizable health indicators from the <u>California Health Interview Survey</u>.

To date, tens of thousands of users have used the tools to ask:

AskCHIS

(Counties, service planning areas, state level)

1.25 million lifetime queries

123,742 total indicators queried

AskCHIS NE

(ZIP codes, cities, legislative districts)

68,386 lifetime queries



(12 months)*

Top indicators: Insurance, gender, asthma, race, poverty level (all for child/adult/teen)

19,845 total indicators queried (12 months)*

68,962 total geographies queried

Top indicators: Adult obesity, child/teen/adult asthma, adult diabetes, adult asthma,

□adult food security

*12-month figures are for Nov. 2016 through Nov. 2017

Find health data at AskCHIS and AskCHIS NE

Three questions for the expert







□In this year-end <u>brief interview</u>, Center Director <u>Gerald Kominski</u>discusses what to expect if the House and Senate agree upon a tax plan that axes the individual mandate, how California can protect its achievements, and whether 2018 will bring any relief.

Kominski

Read the interview

Save the date: Jan. 25, 2018 seminar□
Older Californians and the Mental Health Services
Act: Is an Older Adult System
□ of Care Supported?



Mental health care for older Californians is a critical issue. On Jan. 25, 2018, Center Faculty Associate Janet Frank and Center Research Scientist Kathryn Kietzman will discuss results from the first study to assess how California's public mental health delivery system has served adults age 60 and older since passage of the Mental Health Services Act (MHSA) in 2004.





Frank

Kietzman

What is the level of unmet need? What promising programs and strategies have counties advanced to address these deficits?

□What:

"Older Californians and the Mental Health Services Act: Is an Older Adult System of Care Supported?"

When:

Thursday, Jan. 25, 2018 Noon - 1 p.m. PST

Where:

UCLA Center for Health Policy Research 10960 Wilshire Blvd., Suite 1550



Los Angeles, CA 90024 [Map]

Join us in person

Join us via livestream

Journal article: Study reports economic and health issues among paid family caregivers

A new <u>study</u> by Geoffrey Hoffman and Center Associate Director <u>Steven P. Wallace</u> analyzes the economic and health benefits — and drawbacks — to family and friends who are caregivers of Medi-Cal recipients who have a long-term illness or disability.

Using 2009 <u>California Health Interview Survey</u> data, authors found that among family or friends providing care, paid caregivers had higher levels of economic need than unpaid caregivers, and those with the greatest economic needs had more than twice the odds of reporting serious





emotional distress compared to those with the least economic needs.

Wallace

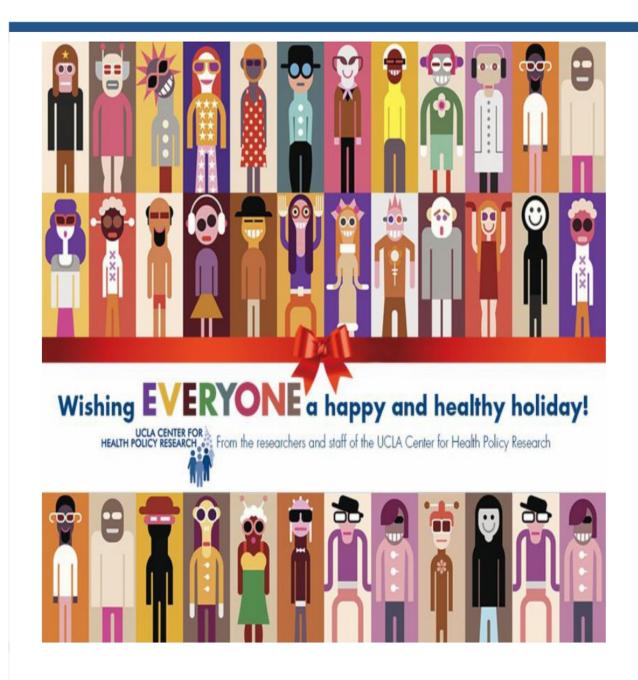
The article concluded that increasing the wages of paid caregivers could both improve the economic status and health of the caregivers.

Read the Study



Happy Holidays from the UCLA Center for Health Policy Research!





The Center will be closed from Dec. 25, 2017, to Jan 1, 2018, in observance of the winter holiday. Media needing assistance during this time can contact <u>Director of Communications and Publications Gwen Driscoll</u>.



In the media Center data and researchers were featured this month in dozens of media stories:

CNN Money, San Francisco Chronicle, Los Angeles Times, KPCC-FM, San Bernardino Sun, CalMatters, and more.

See all of our media hits in the Center's Newsroom.

<u>LOS ANGELES TIMES</u>: Center Director <u>Gerald Kominski</u>commented in a <u>story</u> about the proposed \$69-billion CVS Health-Aetna Inc. merger and whether consumers will benefit.

<u>CNN MONEY</u>, <u>CBS-LA</u>, <u>KTLA</u>: A <u>Kaiser Health News</u> story that quoted <u>Kominski</u>on the importance of advertising open enrollment season on the health exchange was republished in dozens of media.



SAN FRANCISCO CHRONICLE: Signups in the first two weeks of open enrollment on the state health exchange was 23-percent higher than the same period last year, which Center Director of Research Nadereh Pourat called "stunning." Covered California reports 48,000 people have enrolled so far.

KPCC-89.9 FM: Pourat was quoted and her 2014 study cited in a story about how rescinding of the Deferred Action for Childhood Arrivals, or DACA, could affect the mental health of 20,000 young undocumented "dreamers" in the program.



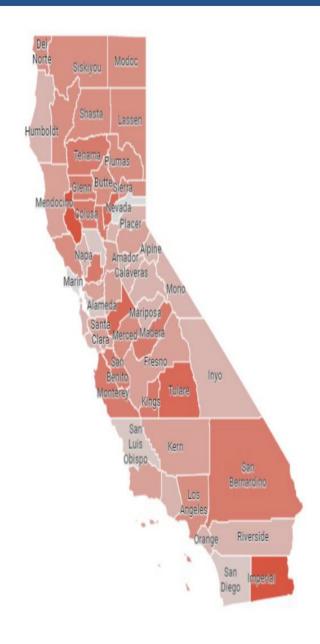
Pourat

<u>DAILY REPUBLIC</u>: The Daily Republic cited <u>CHIS</u> adult health statistics for Solano County in a column that highlighted steps the county is taking to improve community health.

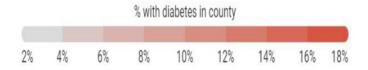
<u>CALMATTERS</u>: A story cited research from a <u>prediabetes</u> <u>study</u> co-authored by Senior Research Scientist <u>Susan</u> <u>Babey</u> about the billions of dollars spent in California on diabetes treatment vs. the amount spent on prevention.

SAN BERNARDINO





<u>SUN</u>: Data from the <u>California</u> <u>Health Interview Survey</u> was cited in a San Bernardino Sun op-ed column about an activity campaign in the county, where just 23 percent of adults and 34 percent youths get the recommended levels of physical activity.



Source: UCLA Center for Health Policy Research; Public Health Advocates



UCLA Center for Health Policy Research | 10960 Wilshire Blvd, Ste 1550, Los Angeles, CA 90024 $\,$

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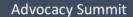
Sender: UCLA Center for Health Policy Research <healthpolicy@ucla.edu></healthpolicy@ucla.edu>		UCLA Center for Health Policy Research <healthpolicy@ucla.edu></healthpolicy@ucla.edu>
	Recipient:	Smith, Adrienne M. (OS/OASH)
	Sent Date:	2017/12/13 12:16:27
	Delivered Date:	2017/12/13 12:17:20



From:	From: Society for Public Health Education <info@sophe.org></info@sophe.org>	
To: Smith, Adrienne M. (OS/OASH)		
Subject:	Subject: News U Can Use August 5, 2017	
Date:	2017/08/05 16:16:11	
Priority: Normal		
Туре:	Note	







Looking for additional way to get involved with SOPHE professional development or leadership? View the opportunities listed in this issue of *News U Can Use* under <u>Take Action</u>.





EACH | Partnering4Health



National Farmers Market Week, August 6-12

Next week, communities celebrate their local farmer's markets during National Farmers Market Week. The Farmers' Market Coalition hopes you will celebrate by visiting your local market and spreading the word that markets are



much more than an outlet for fresh produce and friendly farmers.

According to the Farmers' Market Coalition, farmers' markets

- Stimulate local economies
- Increase access to fresh, nutritious food
- Support healthy communities
- Promote sustainability

Learn more fast facts about farmers markets.



Resources

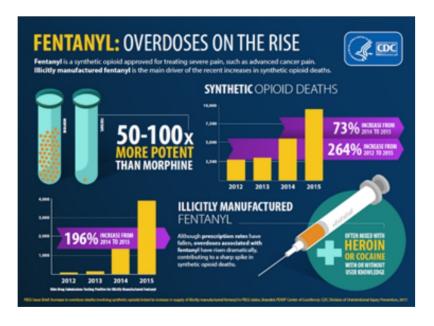
CDC Vital Signs for prescribing opioids and the association to rising synthetic opioid overdose deaths

The CDC's <u>Guideline for Prescribing Opioids for</u>
<u>Chronic Pain - United States, 2016</u> addresses when to prescribe opioids, the risk assessment that is needed before prescribing, and the appropriate dosage. These guidelines are

intended to improve communication between patient and provider.

CDC's <u>July 2017 issue of Vital Signs</u> highlights how prescribing still remains high, despite recent declines, and vary from county to county. Use this fact sheet to understand how the epidemic has grown from 1999 to 2015, how characteristics of counties influence higher prescribing, and how we can each do our part to achieve safer prescribing practices.

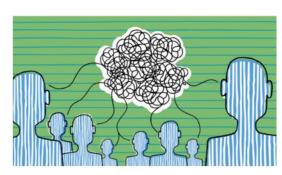
Learn more about <u>opioid prescribing</u> and overdose deaths involving synthetic opioids (other than methadone) linked to an increase in supply of fentanyl.





Improving Collaboration among Health Communication, Health Education, and Health Literacy

Health communication, health education, and health literacy are rooted in a common understanding of human communication.
While it's clear that these fields are inextricably linked, they often operate separately and in silos.



In a new discussion paper from the National Academy of Medicine, authors provide a call to action for health communication, health education, and health literacy to begin working together in collaboration toward their shared goals of enhancing human health, improving health outcomes, and reducing health disparities.

National Consortium for Public Health Workforce Development

A new report, <u>Building Skills for a Changing Public Health Landscape: A Call to Action</u>, explores systems-oriented strategic skills conducive of work across health's changing landscape. Convened by the de Beaumont Foundation across diverse constituencies, the National Consortium for Public Health Workforce Development identified key opportunities for growth in the public health field and issued this call to action for a strategic, system-wide commitment to public health workforce development at



federal, state, and local levels. NACCHO is one of the 31 organizations that contributed to the recommendations in this report.

Advocacy

Advocate for health education specialists to be included in the new payment and delivery systems for Medicare, Medicaid, and CHIP

When: September 8, 2017 10:00 a.m. - 5:00 p.m. EDT Where: 7500 Security Boulevard, Baltimore, MD

Find more information and to register.

The Innovation Center within the Centers for Medicare and Medicaid (CMS) will be hosting a meeting in the Grand Auditorium of the CMS Central Office. The Innovation Center is interested in creating a new system of payment and service delivery for Medicare, Medicaid, and CHIP beneficiaries to improve the quality and accessibility of health care, while lowering the cost of care for these beneficiaries with behavioral conditions. This is an excellent opportunity for health education specialists to advocate for their services to be included in the new payment and service delivery models as a reimbursable service.

It's time to plan for Healthy People 2030

The U.S. Department of Health and Human Services is soliciting written comments on the proposed framework for Healthy People 2030 that was developed by the Secretary's Advisory Committee on National Health Promotion and Disease Prevention Objectives for 2030.



The request for public comment published here is the first step in the agency's development of the Healthy People 2030 framework. This framework includes the Healthy People 2030 vision, mission, foundational principles, plan of action, and overarching goals - and it will guide the selection and prioritization of objectives for Healthy People 2030.

SOPHE will draft comments on potential elements of the framework that would impact prevention and population health and will share those as a model as soon as they are ready.

Members of the public are invited to submit comments on the proposed framework by **September 29, 2017 at 5:00 p.m. EDT**. <u>Learn more and submit your comments today!</u>

Take Action

Nominations extended for SOPHE 2018-19 Officers

SOPHE is looking for individuals with strong leadership skills and a commitment to health education and health promotion for:



- President-elect (3-year term);
- Secretary (2-year term);
- Trustee, 2019 Meeting (2-year term);
- Trustee, Professional Preparation (2-year term);
- Trustee, Membership &Leadership Development (2-year term);
- Trustee, Communications (2-year term);
- Trustee, Research & Ethics (2-year term); and
- Student Trustee (1-year term)

If you are interested or know someone who is, please contact Dr. Keon Gilbert kgilber9@slu.edu. Deadline: August 15.

Together, we can ensure that SOPHE has a strong and vibrant future!



Sign up for our *Faces of Health Education Specialists* series

How do you answer the question, "What is a health education specialist?" SOPHE wants to highlight the varied careers and great work of health education specialists (HES) at every level of the field.



Sign up to be featured in **SOPHE's Faces of HES series**.

Nominate a peer or colleague for a SOPHE award

Apply before the September 30 deadline.

Awards are presented at SOPHE's 2018 Annual Conference. April 4-6, 2018 in Columbus, Ohio.



Pictured [l-r]: Elaine Auld, SOPHE CEO; Jagdish Khubchandani, MBBS, PhD, 2017 Dorothy Nyswander Open Society Awardee & Sandra Bulmer, PhD, 2015 SOPHE President



Submit your abstract for SOPHE's 2018 Annual Conference

<u>Learn more about abstract submission</u> information/instructions.



Deadline: Monday, August 7, 2017 @ 11:59 p.m. EDT

Webinars

Webinar: Zombies, Ebola, and Other Pandemics: Lessons Learned in Health Risk Communication

When: Thursday, August 10, 2017 | 1:00 p.m. - 2:00 p.m.

EDT

Cost: Free

Health risk communication is a difficult task. Ideally, it addresses the public's need for information without causing unnecessary alarm. Two recent articles in Health Education &Behavior examined the results of two Centers for Disease Control and Prevention campaigns to engage the public. Frank Houghton will share how the CDC's campaign, "Preparedness 101: Zombie Pandemic" led to an unexpected response in his study of a group of schoolchildren. Yulia A. Strekalova will discuss how Facebook users responded to the CDC's Facebook posts on the emerging Ebola pandemic in 2014.



Webinar: Getting Equity in Obesity Prevention: A New Framework

When: Wednesday, August 16, 2017 | 2:00 p.m. - 3:00

p.m. EDT **Cost**: Free



Health equity remains a high priority area. In this webinar, Dr. Kumanyikawill and Dr. Dietz will explain why obesity and overweight in children and adults should be framed as a health equity issue. Attendees will learn a new framework for addressing obesity and overweight which addresses social determinants, identfy four components of a new health equity framework, and describe the relationship between clinical and community partners and systems in building community resilience for preventing and controlling obesity and overweight.

Webinar: <u>Using a Systems Model to Simulate Policy Impacts on Obesity</u>
<u>Prevalence and Cost</u>

When: Wednesday, August 17, 2017 | 1:00 p.m. - 2:00

p.m. EDT Cost: Free

Systems thinking, especially with simulation models, facilitates understanding of complex health policy problems. Using a simulation model to educate legislators, educators, and health experts about the policies that have the greatest short- and long-term impact on childhood obesity can encourage strategic investment in low-cost, high-return policies. This webinar will feature the Georgia childhood obesity model created by and for legislators and other stakeholders to support a dialogue on policy interventions designed to reduce childhood obesity (specifically, BMI for age percentiles). Participants will have the opportunity to "play" in the model and understand how policies and evidence-based interventions can impact obesity prevalence and costs over time.



Webinar: <u>Developing Sustainable Policy Using Data</u>

When: Wednesday, August 23, 2017 | 2:00 p.m. - 3:00

p.m. EDT **Cost**: Free



Focus: broad overview of the use of data for policy to facilitate the development of sustainable policy.

Will explore the "so what" for academicians and researchers as well as other strategies for policy work.

SOPHE Publications

Latest Issue: Health Education & Behavior Vol. 44, No. 4, August 1, 2017 is now available online

<u>Table of Contents alert</u>
<u>Do Emotions Spark Interest in Alternative</u>
<u>Tobacco Products?</u>

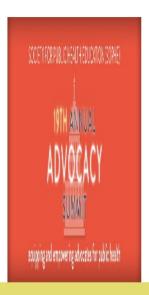
Authors:

Lucy Popova, PhD, Jiyeon So, PhD, Angeline Sangalang, PhD, Torsten B. Neilands, PhD, Pamela M. Ling, MD, MPH









Register today!

SOPHE's 19th Annual Advocacy Summit October 21 - 23, 2017 Washington Court Hotel Washington, D.C.

Website | Membership | Contact









Society for Public Health Education, 10 G Street, NE, Suite 605, Washington, DC 20002

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Sender:	Society for Public Health Education <info@sophe.org></info@sophe.org>
Recipient:	Smith, Adrienne M. (OS/OASH)
Sent Date:	2017/08/05 16:15:02
Delivered Date:	2017/08/05 16:16:11



From:	Leggin, Brooke (HHS/OWH)
To:	Disckind, Barbara (HHS/OASH) ; Abercrombie, Ann (HHS/OASH)
CC:	Smith, Adrienne M. (OS/OASH)
Subject:	RE: Illness and Disability section on womenshealth.gov
Date:	2017/03/24 10:31:54
Priority:	Normal
Туре:	Note

(b)(5)

From: Disckind, Barbara (HHS/OASH) Sent: Friday, March 24, 2017 10:20 AM

To: Leggin, Brooke (HHS/OWH); Abercrombie, Ann (HHS/OASH)

Cc: Smith, Adrienne M. (OS/OASH)

Subject: RE: Illness and Disability section on womenshealth.gov

(b)(5)

If yes, that would be super great!

Barbara B. Disckind

Senior Writer



OWH_logo_150

Office on Women's Health

U.S. Department of Health and Human Services

1101 Wootton Parkway, Rockville, MD 20852

E-mail: barbara.disckind@hhs.gov

Main: 202-690-7650 | Direct: : 240.453.6047

Websites: www.womenshealth.gov | www.girlshealth.gov OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov Connect with us on: Twitter | Facebook | YouTube

-

From: Leggin, Brooke (HHS/OWH) Sent: Friday, March 24, 2017 10:17 AM

To: Disckind, Barbara (HHS/OASH); Abercrombie, Ann (HHS/OASH)



Subject: RE: Illness and Disability section on womenshealth.gov				
(b)(5)				
From: Disckind, Barbara (HHS/OASH)				
Sent: Friday, March 24, 2017 10:12 AM To: Leggin, Brooke (HHS/OWH); Abercrombie, Ann (HHS/OASH) Cc: Smith, Adrienne M. (OS/OASH)				
Subject: Illness and Disability section on womenshealth.gov				
Hello, hello,				
I'm on the Disabilities workgroup of HP2020 and so went to womenshealth.gov. https://www.womenshealth.gov/illnesses-disabilities/index.html				
(b)(5)				

Women are affected by many different illnesses and disabilities, which can range in severity. Some disabilities are rare, and some are more common. Some disabilities are visible to others—such as blindness or paralysis. But many are not. For instance, some mental illnesses affect people's ability to do their jobs or manage a household. Some people are born with disabilities. Some disabilities result from illness or an accident. Many disabilities come on as people age. As the number of older Americans grows, so does the number of people living with a disability. Because women live longer than men, women are more likely to be limited in the amount or kind of major activity they can perform. The illnesses and disabilities featured in this section of womenshealth.gov affect large numbers of women. If you don't see a topic, you also can check our A-Z health topics list.

Barbara B. Disckind

Cc: Smith, Adrienne M. (OS/OASH)



Senior Writer



OWH_logo_150

Office on Women's Health U.S. Department of Health and Human Services

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Websites: www.womenshealth.gov | www.girlshealth.gov OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov Connect with us on: Twitter | Facebook | YouTube

-

Sender:	Leggin, Brooke (HHS/OWH)
Recipient:	Disckind, Barbara (HHS/OASH) ; Abercrombie, Ann (HHS/OASH) ; Smith, Adrienne M. (OS/OASH)
Sent Date:	2017/03/24 10:31:53
Delivered Date:	2017/03/24 10:31:54



From:	Smith, Adrienne M. (OS/OASH)
То:	Collins Sharp, Beth (OS/OASH/OWH/DPI) ; Cha, Jooyoung (HHS/OASH) ; Disckind, Barbara (HHS/OASH) ; Nelson, Keiva (OS/OASH) ; Nixon, Emmett (HHS/OASH) ; Perrotte, Brittany (HHS/OASH) ; Polacek, Aaron (OS/OASH) ; Singleton, Ursuline (HHS/OASH) ; Uddin, Sayeedha (OS/OASH) ; Worstell, Mary (HHS/OASH) ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d055109c7d84d4ab185504fbb32d4e6-Uddin, Saye>; Worstell, Mary (HHS/OASH) ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d055109c7d84d4ab185504fbb32d4e6-Uddin, Saye>; Worstell, Mary (HHS/OASH) ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d055109c7d84d4ab185504fbb32d4e6-Uddin, Saye>;
Subject:	Just a few items to remember while I am away
Date:	2017/02/09 06:38:00
Priority:	Normal
Туре:	Note
Геат, lust as a reminder,	Beth will be director of two (2) divisions and we need to ensure our work is d
	ency to not overburden her with things we can handle ourselves.
College Sexual Assa	uit Initiative Team
b)(5)	

Breastfeeding (b)(5) Policy Documents (b)(5)



Project Descriptions on the website			
(b)(5)			
Work Highlights/OASH Reports			
(b)(5)			
COR Training (b)(5)			
2017 PMAPs			
(b)(5)			

Thanks again for your support, Adrienne

Adrienne M. Smith, PhD, MS, CHES

Director, Division of Policy and Performance Management



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Office on Women's Health

U.S. Department of Health and Human Services

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Main: 202-690-7650 | Direct: 202-690-5884 | Fax: 202-205-0626 Websites: www.womenshealth.gov | www.girlshealth.gov OWH Helpline: 1-800-994-9662 | womenshealth@hhs.gov Connect with us on: Twitter | Facebook | YouTube

Sender:	Smith, Adrienne M. (OS/OASH)
Recipient:	Collins Sharp, Beth (OS/OASH/OWH/DPI) ; Cha, Jooyoung (HHS/OASH) ; Disckind, Barbara (HHS/OASH) ; Nelson, Keiva (OS/OASH) ;



Nixon, Emmett (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5a8a08f3847942eaa590d9cc19feee02-Nixon, Emme>; Perrotte, Brittany (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d62da2638cd245be93e91cb94bb19515-Perrotte, B>; Polacek, Aaron (OS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=41ebfbc7d3cf44fc8616d5cbf9b7a60a-Polacek, Aa>; Singleton, Ursuline (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c3584792a7f3405c9ee55798932dbf2f-Singleton,>; Uddin, Sayeedha (OS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d055109c7d84d4ab185504fbb32d4e6-Uddin, Saye>; Worstell, Mary (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9918a7ec037f45e2931f9db07621da81-Worstell, M>

Sent Date: 2017/02/09 06:39:04

Delivered Date: 2017/02/09 06:38:00





Office of the Secretary

Assistant Secretary for Public Affairs Washington, D.C. 20201

PHS Case No. 18-0153-FOIA

October 31, 2019

Sara Creighton American Oversight 1030 15th Street NW, Suite B255 Washington, DC 20005

Dear Sara Creighton:

This is the first interim response to your April 2, 2018, Freedom of Information Act (FOIA) request. You requested the following: "[All communications (including email messages, text messages, instant messages, letters, memoranda or any other communications) sent to or from anyone in the Office on Women's Health regarding the womenshealth.gov website or any other websites hosting or containing content relating to the Office on Women's Health, between January 1, 2017, and the date your search is conducted."

The Department has processed 985 pages of potentially responsive records captured in the agency's search for FOIA request 18-00934-FOIA. After a careful review of these pages, I have determined to release 306 pages to you in their entirety, and I am further releasing 134 pages in part, with portions redacted, pursuant to Exemptions (b)(5) and (b)(6) of the FOIA (5 U.S.C. § 552), of which the referenced pages are enclosed. I have also determined that 545 pages should also be withheld in their entirety under Exemptions (b)(5).

FOIA exemption (b)(5) protects inter-agency or intra-agency memoranda or letters which would not be available by law to a party other than an agency in litigation with the agency. This exemption protects documents that would be covered by any privilege an agency could assert in a civil proceeding. These privileges include, among others, the deliberative process privilege, the attorney-client privilege, and the attorney work-product privilege.

FOIA exemption (b)(6) permits a Federal agency to withhold information and records about individuals in "personnel and medical files and similar files, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy."

We will continue to review the remaining records as efficiently and expeditiously as possible, consistent with our available resources. Should you have questions or concerns regarding the Department's response and/or the processing of your request, any such issues should be communicated to your legal counsel and the Department of Justice Attorney representing the Department in this matter.



Sincerely yours,

Befall Brandon J. Gaylord

Supervisory Government Information Specialist

and HHS FOIA/PA Public Liaison

Enclosure(s)

